## Case 18-60624-can13 Doc 1 Filed 05/30/18 Entered 05/30/18 14:34:09 Desc Main Document Page 1 of 48

| Fill in this information to identify your case: |                               |                                 |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the:         |                               |                                 |
| WESTERN DISTRICT OF MISSOURI                    | -                             |                                 |
| Case number (if known)                          | Chapter you are filing under: |                                 |
|   | ☐ Chapter 7                   |                                 |
|   | ☐ Chapter 11                  |                                 |
|   | ☐ Chapter 12                  |                                 |
|   | ■ Chapter 13                  | Check if this an amended filing |

#### Official Form 101

### Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Ide                      | entify Yourself   |  |   |   |
|-----|-------------------------------|---|--|---|---|
|     |                               |   | About Debtor 1:                                  | A | About Debtor 2 (Spouse Only in a Joint Case): |
| 1.  | Your fu                       | ıll name  |  |   |   |
|     | your go<br>picture<br>example | ne name that is on<br>vernment-issued<br>identification (for<br>e, your driver's<br>or passport). | Shelly First name  Ann Middle name               |   | First name  Middle name                       |
|     | Bring yo                      | our picture cation to your g with the trustee.  | O'Brien Last name and Suffix (Sr., Jr., II, III) |   | Last name and Suffix (Sr., Jr., II, III)      |
| 2.  |                               | er names you have<br>n the last 8 years   |  |   |   |
|     | Include<br>maiden             | your married or names.  |  |   |   |
| 3.  | your So<br>numbe<br>Individ   | ne last 4 digits of<br>ocial Security<br>r or federal<br>ual Taxpayer<br>cation number            | xxx-xx-3279                                      |   |   |

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Debtor 1 Shelly Ann O'Brien Case number (if known)

|    |   | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):  |
|----|---|---|--|
| 1. | Any business names and<br>Employer Identification<br>Numbers (EIN) you have<br>used in the last 8 years | ■ I have not used any business name or EINs.  | ☐ I have not used any business name or EINs.   |
|    | Include trade names and doing business as names   | Business name(s)  | Business name(s)   |
|    |   | EINs  | EINs   |
| 5. | Where you live  | 1001 N. 24th St.  | If Debtor 2 lives at a different address:  |
|    |   | Ozark, MO 65721  Number, Street, City, State & ZIP Code   | Number, Street, City, State & ZIP Code   |
|    |   |   | Number, Street, City, State & ZIP Code   |
|    |   | Christian County  | County   |
|    |   | ,   | County   |
|    |   | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
|    |   | Number, P.O. Box, Street, City, State & ZIP Code  | Number, P.O. Box, Street, City, State & ZIP Code   |
| ò. | Why you are choosing this district to file for  | Check one:  | Check one:   |
|    | bankruptcy  | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                       |
|    |   | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)  | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)   |
|    |   |   |  |

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| Deb | otor 1 Shelly Ann O'Brie   | n   |                           |  | _                                    | Case                                     | number (if known)                                  |  |  |
|-----|--|---|---------------------------|--|--------------------------------------|--|--|--|--|
|     |  |   |                           |  |                                      |  |  |  |  |
| Par | t 2: Tell the Court About  | Your Bankrupt   | су Са                     | se   |                                      |  |  |  |  |
| 7.  | The chapter of the Bankruptcy Code you are   | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. |                           |  |                                      |  |  |  |  |
|     | choosing to file under   | ☐ Chapter 7   |                           |  |                                      |  |  |  |  |
|     |  | ☐ Chapter 1   | 1                         |  |                                      |  |  |  |  |
|     |  | ☐ Chapter 1   | 2                         |  |                                      |  |  |  |  |
|     |  | Chapter 1   | 3                         |  |                                      |  |  |  |  |
| 8.  | How you will pay the fee   | about h<br>order. It  | ow yo<br>your             | entire fee when I file my pe<br>u may pay. Typically, if you a<br>attorney is submitting your pa<br>address. | re paying                            | the fee yourself                         | , you may pay with cash                            | h, cashier's check, or money                                     |  |
|     |  |   |                           | the fee in installments. If y  |                                      | e this option, sig                       | n and attach the Application                       | ation for Individuals to Pay                                     |  |
|     |  | ☐ I reque but is no applies   | st that<br>ot requito you | ur family size and you are una   | y request<br>may do so<br>able to pa | o only if your inc<br>y the fee in insta | ome is less than 150% (<br>Ilments). If you choose | of the official poverty line that this option, you must fill out |  |
|     |  | the App   | olicatio                  | on to Have the Chapter 7 Filin   | g Fee Wa                             | nived (Official Fo                       | rm 103B) and file it with                          | n your petition.   |  |
| 9.  | Have you filed for bankruptcy within the last 8 years?   | □ No. ■ Yes.  |                           |  |                                      |  |  |  |  |
|     | ·  | Di  | strict                    | Western District of Missouri (chapter 7)   | When                                 | 1/12/12                                  | Case number  | 12-60049   |  |
|     |  | Di  | strict                    | Western District of Missouri (chapter 7)   | When                                 | 4/19/99                                  | Case number  | 99-60667   |  |
|     |  | Di  | strict                    |  | When                                 |  | Case number  |  |  |
| 10. | Are any bankruptcy   | ■ No  |                           |  |                                      |  |  |  |  |
|     | cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes.  |                           |  |                                      |  |  |  |  |
|     |  | De  | btor                      |  |                                      |  | Relationship to                                    | you  |  |
|     |  | Di  | strict                    |  | _ When                               |  | Case number, if                                    | known  |  |
|     |  | De  | btor                      |  |                                      |  | Relationship to                                    | you  |  |
|     |  | Di  | strict                    |  | _ When                               |  | Case number, if                                    | known  |  |
| 11. | Do you rent your residence?  | ■ No.   | So to li                  | ine 12.  |                                      |  |  |  |  |
|     | residence:   | ☐ Yes. ⊢  | las yo                    | ur landlord obtained an evicti   | on judgm                             | ent against you?                         | •  |  |  |
|     |  |   | ]                         | No. Go to line 12.   |                                      |  |  |  |  |
|     |  |   | ]                         | Yes. Fill out <i>Initial Statemen</i> this bankruptcy petition.  | t About ar                           | n Eviction Judgn                         | nent Against You (Form                             | 101A) and file it as part of                                     |  |

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Shelly Ann O'Brien Case number (if known) Debtor 1 Part 3: Report About Any Businesses You Own as a Sole Proprietor Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Chapter 11 of the **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention? For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs? Number, Street, City, State & Zip Code

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Debtor 1 Shelly Ann O'Brien Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| Deb  | tor 1 Shelly Ann O'Brie                          | n                   |   |  | Case number            | (if known)   |  |
|------|--|---------------------|---|--|------------------------|--|--|
| Part | 6: Answer These Quest                            | ions for R          | eporting Purposes   |  |                        |  |  |
| 16.  | What kind of debts do you have?                  | 16a.                | 6a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurre individual primarily for a personal, family, or household purpose." |  |                        |  |  |
|      |  |                     | ☐ No. Go to line 16b.   |  |                        |  |  |
|      |  |                     | Yes. Go to line 17.   |  |                        |  |  |
|      |  | 16b.                |   | y business debts? Busines investment or through the op         |                        |  |  |
|      |  |                     | ☐ No. Go to line 16c.   |  |                        |  |  |
|      |  |                     | ☐ Yes. Go to line 17.   |  |                        |  |  |
|      |  | 16c.                | State the type of debts yo  | ou owe that are not consume                                    | er debts or business   | debts  |  |
| 17.  | Are you filing under<br>Chapter 7?               | ■ No.               | I am not filing under Chap  | pter 7. Go to line 18.   |                        |  |  |
|      | Do you estimate that after any exempt            | ☐ Yes.              |   | 7. Do you estimate that afte available to distribute to un     |                        | ty is excluded and administrative expenses   |  |
|      | property is excluded and administrative expenses |                     | □No   |  |                        |  |  |
|      | are paid that funds will<br>be available for     |                     | □Yes  |  |                        |  |  |
|      | distribution to unsecured creditors?             |                     |   |  |                        |  |  |
| 18.  | How many Creditors do                            | <b>■</b> 1-49       |   | <b>1</b> ,000-5,000  |                        | □ 25,001-50,000  |  |
|      | you estimate that you owe?                       | □ 50-99             | )   | <u> </u>   |                        | <u></u> 50,001-100,000   |  |
|      |  | ☐ 100-1<br>☐ 200-9  |   | ☐ 10,001-25,000  | 0                      | ☐ More than100,000   |  |
| 19.  | How much do you                                  | <b>\$</b> 0 - \$    | 50 000  | □ \$1,000,001 - \$   | \$10 million           | □ \$500,000,001 - \$1 billion  |  |
|      | estimate your assets to be worth?                |                     | 01 - \$100,000  | □ \$10,000,001 -   | \$50 million           | □ \$1,000,000,001 - \$10 billion   |  |
|      | 30 1101111                                       |                     | 001 - \$500,000   | \$50,000,001 -   |                        | □ \$10,000,000,001 - \$50 billion  |  |
|      |  | <b>□</b> \$500,     | 001 - \$1 million   | □ \$100,000,001  | - \$500 million        | ☐ More than \$50 billion   |  |
| 20.  | How much do you                                  | <b>\$</b> 0 - \$    | 50 000  | □ \$1,000,001 - \$   | \$10 million           | ☐ \$500,000,001 - \$1 billion  |  |
|      | estimate your liabilities to be?                 |                     | 001 - \$100,000   | □ \$10,000,001 -   | \$50 million           | □ \$1,000,000,001 - \$10 billion   |  |
|      | to be:   | □ \$100,            | 001 - \$500,000   | \$50,000,001 -   |                        | \$10,000,000,001 - \$50 billion  |  |
|      |  | <b>□</b> \$500,     | 001 - \$1 million   | □ \$100,000,001  | - \$500 million        | ☐ More than \$50 billion   |  |
| Part | 7: Sign Below                                    |                     |   |  |                        |  |  |
| For  | you  | I have ex           | camined this petition, and I  | declare under penalty of pe                                    | rjury that the informa | ation provided is true and correct.  |  |
|      |  |                     |   |  |                        | nder Chapter 7, 11,12, or 13 of title 11, ose to proceed under Chapter 7.          |  |
|      |  |                     |   | did not pay or agree to pay s<br>d the notice required by 11 L |                        | an attorney to help me fill out this   |  |
|      |  | I request           | relief in accordance with the   | he chapter of title 11, United                                 | States Code, specif    | ied in this petition.  |  |
|      |  | bankrupt<br>and 357 | cy case can result in fines   |  |                        | property by fraud in connection with a ars, or both. 18 U.S.C. §§ 152, 1341, 1519, |  |
|      |  | Shelly A            | Ann O'Brien<br>e of Debtor 1  |  | Signature of Debtor 2  | 2  |  |
|      |  | Executed            | d on <b>May 23, 2018</b>  | E  | Executed on            |  |  |
|      |  |                     | MM / DD / YYYY  |  | MM /                   | DD / YYYY  |  |
|      |  |                     |   |  |                        |  |  |

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Debtor 1 Shelly Ann O'Brien Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Nicole L. Barrett                  | Date          | May 23, 2018               |
|--|---------------|----------------------------|
| Signature of Attorney for Debtor       |               | MM / DD / YYYY             |
| N                                      |               |                            |
| Nicole L. Barrett 57747                |               |                            |
| Printed name                           |               |                            |
| Barrett Law, LLC                       |               |                            |
| Firm name                              |               |                            |
| PO Box 1447                            |               |                            |
| Ozark, MO 65721                        |               |                            |
| Number, Street, City, State & ZIP Code |               |                            |
| Contact phone 417-239-4729             | Email address | nicolebarrettlaw@gmail.com |
| 57747 MO                               |               |                            |
| Bar number & State                     |               |                            |

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B2030 (Form 2030) (12/15)

#### United States Bankruptcy Court Western District of Missouri

| In   | re Shelly Ann O'Brien   |   | Case No.                                      |                               |                 |
|------|---|---|---|-------------------------------|-----------------|
|      |   | Debtor(s)   | Chapter                                       | 13                            |                 |
|      | DISCLOSURE OF COMPENS   | SATION OF ATTO  | RNEY FOR DI                                   | EBTOR(S)                      |                 |
| 1.   | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), compensation paid to me within one year before the filing of be rendered on behalf of the debtor(s) in contemplation of contemplation.   | of the petition in bankruptcy                             | , or agreed to be paid                        | to me, for services           |                 |
|      | For legal services, I have agreed to accept   |   | <b></b>                                       | 3,500.00                      |                 |
|      | Prior to the filing of this statement I have received   |   | <b></b> \$                                    | 750.00                        |                 |
|      | Balance Due   |   |   | 2,750.00                      |                 |
| 2.   | \$310.00 of the filing fee has been paid.   |   |   |                               |                 |
| 3.   | The source of the compensation paid to me was:  |   |   |                               |                 |
|      | ■ Debtor □ Other (specify):   |   |   |                               |                 |
| 4.   | The source of compensation to be paid to me is:   |   |   |                               |                 |
|      | ■ Debtor □ Other (specify):   |   |   |                               |                 |
| 5.   | ■ I have not agreed to share the above-disclosed compens  | sation with any other person                              | unless they are mem                           | bers and associates           | of my law firm. |
|      | ☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names  | on with a person or persons sof the people sharing in the | who are not members<br>e compensation is atta | or associates of my<br>ached. | law firm. A     |
| 6.   | In return for the above-disclosed fee, I have agreed to rende   | er legal service for all aspec                            | ts of the bankruptcy                          | case, including:              |                 |
|      | <ul><li>a. Analysis of the debtor's financial situation, and renderin</li><li>b. Preparation and filing of any petition, schedules, stateme</li><li>c. Representation of the debtor at the meeting of creditors</li><li>d. [Other provisions as needed]</li></ul> | ent of affairs and plan which                             | h may be required;                            | -                             | ikruptcy;       |
| 7.   | By agreement with the debtor(s), the above-disclosed fee de   | oes not include the following                             | g service:                                    |                               |                 |
|      |   | CERTIFICATION   |   |                               |                 |
| this | I certify that the foregoing is a complete statement of any as bankruptcy proceeding.   | greement or arrangement fo                                | r payment to me for r                         | epresentation of the          | debtor(s) in    |
|      | May 23, 2018  | /s/ Nicole L. Barr  | ett .   |                               |                 |
| _    | Date  | Nicole L. Barrett   |   |                               |                 |
|      |   | Signature of Attorn Barrett Law, LLC                      | •   |                               |                 |
|      |   | PO Box 1447   | •   |                               |                 |
|      |   | Ozark, MO 65721   |   |                               |                 |
|      |   | 417-239-4729 Fa   |   |                               |                 |
|      |   | Name of law firm  | eginan.com                                    |                               |                 |

Ally Financial Attn: Bankruptcy Po Box 380901 Bloomington MN 55438

Barclays Bank Delaware Attn: Correspondence Po Box 8801 Wilmington DE 19899

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City UT 84130

Citibank/Best Buy Centralized Bankruptcy Po Box 790034 St Louis MO 63179

Comenitycapital/zlotlt Attn: Bankruptcy Dept Po Box 182125 Columbus OH 45318

Credit One Bank Attn: Bankruptcy Po Box 98873 Las Vegas NV 89193

Linda O'Brien 4205 Jenny Lind Fort Smith AR 72901

Synchrony Bank/ JC Penneys Attn: Bankruptcy Dept Po Box 965060 Orlando FL 32896

Synchrony Bank/Sams Attn: Bankruptcy Po Box 965060 Orlando FL 32896 Synchrony Bank/Walmart Attn: Bankruptcy Dept Po Box 965060 Orlando FL 32896

Tower Loan 218-B South Village Center Nixa MO 65714

### United States Bankruptcy Court Western District of Missouri

| In re | Shelly Ann O'Brien           |  | Case No.        |              |
|-------|------------------------------|--|-----------------|--------------|
|       | -                            | Debtor(s)                              | Chapter         | 13           |
|       | <u>V</u>                     | ERIFICATION OF MAILING MA              | ATRIX           |              |
|       | The above-named I            | Debtor(s) hereby verifies that the att | ached list of o | creditors is |
|       | true and correct to the best | of my knowledge and includes the       | name and add    | ress of my   |
|       | ex-spouse (if any).          |  |                 |              |
|       |                              |  |                 |              |
| Date: | May 23, 2018                 | /s/ Shelly Ann O'Brien                 |                 |              |
|       |                              | Shelly Ann O'Brien                     |                 |              |
|       |                              | Signature of Debtor                    |                 |              |

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| Fill in this infor                      | Il in this information to identify your case: |                    |             |  |                                      |  |  |
|---|---|--------------------|-------------|--|--------------------------------------|--|--|
| Debtor 1                                | Shelly Ann O'Brie                             | en                 |             |  |                                      |  |  |
|   | First Name                                    | Middle Name        | Last Name   |  |                                      |  |  |
| Debtor 2                                |   |                    |             |  |                                      |  |  |
| (Spouse if, filing)                     | First Name                                    | Middle Name        | Last Name   |  |                                      |  |  |
| United States Bankruptcy Court for the: |   | WESTERN DISTRICT ( | OF MISSOURI |  |                                      |  |  |
| Case number                             |   |                    |             |  | ☐ Check if this is an amended filing |  |  |

#### Official Form 106Sum

#### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

|            |  | Your a<br>Value o | ssets<br>of what you own      |
|------------|--|-------------------|-------------------------------|
| 1.         | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$                | 0.00                          |
|            | 1b. Copy line 62, Total personal property, from Schedule A/B   | \$                | 19,045.00                     |
|            | 1c. Copy line 63, Total of all property on Schedule A/B  | \$                | 19,045.00                     |
| ar         | t 2: Summarize Your Liabilities  |                   |                               |
|            |  |                   | <b>abilities</b><br>t you owe |
| 2.         | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$                | 22,554.00                     |
|            | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                            | \$                | 0.00                          |
|            | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$                | 18,301.00                     |
|            | Your total liabilities   | \$                | 40,855.00                     |
| Par        | t 3: Summarize Your Income and Expenses  |                   |                               |
| ١.         | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$                | 2,039.23                      |
| j.         | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  | \$                | 1,556.62                      |
| °ar        | t 4: Answer These Questions for Administrative and Statistical Records   |                   |                               |
|            | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                     | ur other sch      | nedules.                      |
| <b>7</b> . | Yes What kind of debt do you have?   |                   |                               |
|            |  |                   |                               |

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

## Case 18-60624-can13 Doc 1 Filed 05/30/18 Entered 05/30/18 14:34:09 Desc Main Document Page 13 of 48

Debtor 1 Shelly Ann O'Brien Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total claim |      |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following:   |             |      |
| 9a. Domestic support obligations (Copy line 6a.)   | \$          | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$          | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$          | 0.00 |
| 9d. Student loans. (Copy line 6f.)   | \$          | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$          | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$         | 0.00 |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$          | 0.00 |

## Case 18-60624-can13 Doc 1 Filed 05/30/18 Entered 05/30/18 14:34:09 Desc Main Document Page 14 of 48

| Fill in this inf                | formation to identify                          | your case a      | nd this filing:            | in rage 14 or 40  |                                |  |
|---------------------------------|--|------------------|----------------------------|---|--------------------------------|--|
| Debtor 1                        | Shelly Ann C                                   | 'Brien           |                            |   |                                |  |
| Dalatano                        | First Name                                     |                  | Middle Name                | Last Name   |                                |  |
| Debtor 2<br>(Spouse, if filing) | First Name                                     |                  | Middle Name                | Last Name   |                                |  |
| United States                   | Bankruptcy Court for                           | the: WEST        | ERN DISTRICT O             | F MISSOURI  |                                |  |
|                                 |  |                  |                            |   |                                | _  |
| Case number                     |  |                  |                            |   |                                | ☐ Check if this is an amended filing                 |
|                                 |  |                  |                            |   |                                | aeaeag   |
| Official E                      | Form 106A/B                                    |                  |                            |   |                                |  |
|                                 | ule A/B: Pr                                    |                  | ,                          |   |                                | 40/45  |
|                                 |  |                  |                            | once. If an asset fits in more than o   | uno catogory list the asset in | 12/15  |
| hink it fits best               | . Be as complete and a nore space is needed, a | ccurate as po    | ssible. If two marrie      | nder in an asset his in more than o<br>ed people are filing together, both a<br>m. On the top of any additional pag | re equally responsible for su  | pplying correct                                      |
| Part 1: Descri                  | ibe Each Residence, Bu                         | ilding, Land,    | or Other Real Estate       | You Own or Have an Interest In  |                                |  |
| Do you own                      | or have any legal or an                        | iitahle interes  | t in any residence         | building, land, or similar property?  |                                |  |
| . Do you own o                  | or nave any legal or equ                       | illable lilleres | it in any residence, i     | Juliuling, land, or Sillillar property?   |                                |  |
| No. Go to                       | Part 2.  |                  |                            |   |                                |  |
| ☐ Yes. Whe                      | ere is the property?                           |                  |                            |   |                                |  |
| Part 2: Descri                  | ibe Your Vehicles                              |                  |                            |   |                                |  |
|                                 |  |                  |                            | hicles, whether they are registe  |                                | ehicles you own that                                 |
| omeone else                     | drives. If you lease a                         | /ehicle, also    | report it on <i>Schedu</i> | ule G: Executory Contracts and U  | Inexpired Leases.              |  |
| . Cars, vans,                   | , trucks, tractors, spe                        | ort utility vel  | hicles, motorcycle         | es  |                                |  |
| □ No                            |  |                  |                            |   |                                |  |
| ■ Yes                           |  |                  |                            |   |                                |  |
| <b>—</b> 165                    |  |                  |                            |   |                                |  |
| 3.1 Make:                       | Nissan   |                  | Who has an inter           | est in the property? Check one  | Do not deduct secured c        |  |
| Model:                          | Frontier                                       |                  | ■ Debtor 1 only            |   |                                | ed claims on Schedule D:<br>ims Secured by Property. |
| Year:                           | 2012   |                  | Debtor 2 only              |   | Current value of the           | Current value of the                                 |
| Approxir                        | mate mileage:                                  | 58,000           | Debtor 1 and D             | Debtor 2 only   | entire property?               | portion you own?                                     |
| Other in                        | formation:                                     |                  | At least one of            | the debtors and another   |                                |  |
|                                 |  |                  | □ Chook if this i          | s community property  | \$15,444.00                    | \$15,444.00  |
|                                 |  |                  | (see instructions)         |   |                                |  |
|                                 |  |                  |                            |   |                                |  |
|                                 |  |                  |                            | nal vehicles, other vehicles, and<br>ssels, snowmobiles, motorcycle a   |                                |  |
| Lxamples. L                     | Joais, trailers, motors,                       | personal wa      | terciait, listiling ves    | seis, snowmobiles, motorcycle a   | 0000000000                     |  |
| ■ No                            |  |                  |                            |   |                                |  |
| ☐ Yes                           |  |                  |                            |   |                                |  |
|                                 |  |                  |                            |   |                                |  |
|                                 |  |                  |                            |   |                                |  |
|                                 | •  | -                | -                          | ntries from Part 2, including an  | -                              | \$15,444.00  |
| .pages you                      | i nave attached for P                          | art 2. write t   | nat number nere.           |   | =>                             |  |
| Part 3: Descri                  | ibe Your Personal and                          | Household Ite    | ems                        |   |                                |  |
|                                 | or have any legal or                           |                  |                            | e following items?  |                                | Current value of the                                 |
| -                               | , ,  | ·                |                            |   |                                | portion you own?                                     |
|                                 |  |                  |                            |   |                                | Do not deduct secured claims or exemptions.          |
| Household                       | goods and furnishing                           | nas              |                            |   |                                | Janino di Cacinpilono.                               |

Examples: Major appliances, furniture, linens, china, kitchenware

 $\square$  No

Official Form 106A/B Schedule A/B: Property

| Debtor 1                  | Shelly Ann O'Brien Case number (if know  | n)                                 |
|---------------------------|--|------------------------------------|
| ■ Yes.                    | Describe   |                                    |
|                           | Living room set - \$500; Lamp - \$20; Desk - \$100; File cabinet - \$40; Book shelf - \$100; Computer/Printer - \$200; Pots & pans - \$100; Dishes - \$50; Washer/Dryer - \$300; Bedroom set - \$500; TV - \$150; Shop Vac - \$25; Weedeater/Blower - \$50; Tools - \$200; Grill - \$75; Books - \$150; Pictures - \$100 | \$2,660.00                         |
| ■ No                      | nics  les: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music including cell phones, cameras, media players, games  Describe  | c collections; electronic devices  |
| Example ■ No              | <ul> <li>bles of value</li> <li>les: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, contact other collections, memorabilia, collectibles</li> <li>Describe</li> </ul>  | in, or baseball card collections;  |
| Example No                | nent for sports and hobbies  les: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoe musical instruments  Describe  | es and kayaks; carpentry tools;    |
| ■ No                      | ms  ples: Pistols, rifles, shotguns, ammunition, and related equipment  Describe   |                                    |
| □ No                      | ples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories  Describe   |                                    |
|                           | Clothing   | \$200.00                           |
| □ No                      | Py ples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems  Describe  3 Watches - \$75; Misc. jewelry - \$50   | s, gold, silver<br><b>\$125.00</b> |
| Exam <sub>l</sub><br>■ No | arm animals ples: Dogs, cats, birds, horses  Describe  |                                    |
| ■ No                      | ther personal and household items you did not already list, including any health aids you did not list  Give specific information  |                                    |
|                           | the dollar value of all of your entries from Part 3, including any entries for pages you have attached art 3. Write that number here   | \$2,985.00                         |
| Part 4: De                | escribe Your Financial Assets  | Current value of the               |

Do you own or have any legal or equitable interest in any of the following?

portion you own?

| De  | ebtor 1 Shelly A                                   | nn O'Brien                        |                             | Case number   | (if known)                                  |
|-----|--|-----------------------------------|-----------------------------|---|---|
|     |  |                                   |                             |   | Do not deduct secured claims or exemptions. |
|     | □ No   |                                   | our wallet, in your home    |   |   |
|     |  |                                   |                             | Cash  | \$40.00                                     |
|     |  | ng, savings, o<br>ions. If you ha |                             | ts; certificates of deposit; shares in credit unions, b<br>th the same institution, list each.<br>Institution name:               | rokerage houses, and other similar          |
|     |  | 17.1.                             | Checking                    | Great Southern Bank   | \$76.00                                     |
|     |  | 17.2.                             | Health Savings              | HSA Account   | \$500.00                                    |
|     | Bonds, mutual fur Examples: Bond fu ■ No □ Yes     |                                   |                             | rage firms, money market accounts   |   |
| 19. | Non-publicly trade joint venture ■ No              |                                   | ·                           | ted and unincorporated businesses, including a  | an interest in an LLC, partnership, and     |
|     | ☐ Yes. Give specif                                 |                                   | about them<br>me of entity: | % of owners   | hip:  |
| 20. | Negotiable instrun                                 | <i>nent</i> s include p           | personal checks, cashie     | ble and non-negotiable instruments irs' checks, promissory notes, and money orders. fer to someone by signing or delivering them. |   |
|     | Yes. Give specifi                                  |                                   | about them<br>uer name:     |   |   |
|     | ■ No   | ts in IRA, ERIS                   | SA, Keogh, 401(k), 403      | (b), thrift savings accounts, or other pension or prof  | it-sharing plans                            |
|     | Yes. List each ac                                  |                                   | tely.<br>of account:        | Institution name:   |   |
|     |  | nused deposit                     | ts you have made so th      | at you may continue service or use from a company<br>olic utilities (electric, gas, water), telecommunication                     |   |
|     | ☐ Yes  |                                   |                             | Institution name or individual:   |   |
| 23. | _ `  | act for a perio                   | dic payment of money t      | o you, either for life or for a number of years)  |   |
|     | ■ No<br>□ Yes                                      | Issuer nam                        | ne and description.         |   |   |
|     | Interests in an edu<br>26 U.S.C. §§ 530(b)<br>■ No |                                   |                             | ified ABLE program, or under a qualified state t  | uition program.                             |
|     | Yes  | Institution r                     | name and description. S     | Separately file the records of any interests.11 U.S.C   | . § 521(c):                                 |
| 25. | Trusts, equitable                                  | or future inte                    | rests in property (other    | er than anything listed in line 1), and rights or po  | owers exercisable for your benefit          |

■ No
Official Form 106A/B Schedule A/B: Property page 3

Case 18-60624-can13 Doc 1 Filed 05/30/18 Entered 05/30/18 14:34:09 Desc Main Page 17 of 48 Document Debtor 1 Shelly Ann O'Brien Case number (if known) ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ■ No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information..

Official Form 106A/B Schedule A/B: Property page 4

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached

for Part 4. Write that number here......

\$616.00

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Debtor 1 Shelly Ann O'Brien Case number (if known)

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

|              | Chony rum o Enon  |                            |                              |             |
|--------------|---|----------------------------|------------------------------|-------------|
| Part         | 5: Describe Any Business-Related Property You Own or Have an Interes  | est In. List any real esta | ate in Part 1.               |             |
| 37. <b>[</b> | Oo you own or have any legal or equitable interest in any business-relate   | d property?                |                              |             |
|              | No. Go to Part 6.   |                            |                              |             |
|              | Yes. Go to line 38.   |                            |                              |             |
| Part         | 6: Describe Any Farm- and Commercial Fishing-Related Property You of If you own or have an interest in farmland, list it in Part 1. | Own or Have an Interes     | st In.                       |             |
| 46. l        | Do you own or have any legal or equitable interest in any farm-   | or commercial fishin       | ng-related property?         |             |
|              | No. Go to Part 7.   |                            |                              |             |
|              | ☐ Yes. Go to line 47.   |                            |                              |             |
| Part         | 7: Describe All Property You Own or Have an Interest in That You  | Did Not List Above         |                              |             |
| _            | Do you have other property of any kind you did not already list?  Examples: Season tickets, country club membership  No             |                            |                              |             |
|              | Yes. Give specific information  |                            |                              |             |
| 54.          | Add the dollar value of all of your entries from Part 7. Write that   | t number here              |                              | \$0.00      |
| Part         | 8: List the Totals of Each Part of this Form  |                            |                              |             |
| 55.          | Part 1: Total real estate, line 2   |                            |                              | \$0.00      |
| 56.          | Part 2: Total vehicles, line 5  | \$15,444.00                |                              |             |
| 57.          | Part 3: Total personal and household items, line 15   | \$2,985.00                 |                              |             |
| 58.          | Part 4: Total financial assets, line 36   | \$616.00                   |                              |             |
| 59.          | Part 5: Total business-related property, line 45  | \$0.00                     |                              |             |
| 60.          | Part 6: Total farm- and fishing-related property, line 52   | \$0.00                     |                              |             |
| 61.          | Part 7: Total other property not listed, line 54 +  | \$0.00                     |                              |             |
| 62.          | Total personal property. Add lines 56 through 61  | \$19,045.00                | Copy personal property total | \$19,045.00 |
| 63.          | Total of all property on Schedule A/B. Add line 55 + line 62  |                            |                              | \$19 045 00 |

Official Form 106A/B Schedule A/B: Property page 5

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| Fill in this inform | Fill in this information to identify your case: |                    |             |  |                                      |  |  |  |
|---------------------|---|--------------------|-------------|--|--------------------------------------|--|--|--|
| Debtor 1            | Shelly Ann O'Brie                               | en                 |             |  |                                      |  |  |  |
|                     | First Name                                      | Middle Name        | Last Name   |  |                                      |  |  |  |
| Debtor 2            |   |                    |             |  |                                      |  |  |  |
| (Spouse if, filing) | First Name                                      | Middle Name        | Last Name   |  |                                      |  |  |  |
| United States Bar   | nkruptcy Court for the:                         | WESTERN DISTRICT ( | OF MISSOURI |  |                                      |  |  |  |
| Case number         |   |                    |             |  | ☐ Check if this is an amended filing |  |  |  |

#### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: | Identify t | he Property | You Claim | as Exempt |
|---------|------------|-------------|-----------|-----------|
|         |            |             |           |           |

| 1. | Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.   |                                      |     |   |                                    |  |  |  |  |  |
|----|---|--------------------------------------|-----|---|------------------------------------|--|--|--|--|--|
|    | ■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  |                                      |     |   |                                    |  |  |  |  |  |
|    | ☐ You are claiming federal exemptions. 11 t   | J.S.C. § 522(b)(2)                   |     |   |                                    |  |  |  |  |  |
| 2. | For any property you list on Schedule A/B that you claim as exempt, fill in the information below.  |                                      |     |   |                                    |  |  |  |  |  |
|    | Brief description of the property and line on<br>Schedule A/B that lists this property  | Current value of the portion you own | Am  | ount of the exemption you claim                                 | Specific laws that allow exemption |  |  |  |  |  |
|    |   | Copy the value from<br>Schedule A/B  | Che | eck only one box for each exemption.                            |                                    |  |  |  |  |  |
|    | 2012 Nissan Frontier 58,000 miles<br>Line from <i>Schedule A/B</i> : 3.1  | \$15,444.00                          |     | \$3,000.00  | RSMo § 513.430.1(5)                |  |  |  |  |  |
|    | Line from Scriedule A/B: 3.1  |                                      |     | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |  |  |
|    | Living room set - \$500; Lamp - \$20;<br>Desk - \$100; File cabinet - \$40; Book  | \$2,660.00                           |     | \$2,660.00  | RSMo § 513.430.1(1)                |  |  |  |  |  |
|    | shelf - \$100; Computer/Printer - \$200;<br>Pots & pans - \$100; Dishes - \$500;<br>Washer/Dryer - \$300; Bedroom set -<br>\$500; TV - \$150; Shop Vac - \$25;<br>Weedeater/Blower - \$50; Tools -<br>\$200; Gri<br>Line from Schedule A/B: 6.1 |                                      |     | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |  |  |
|    | Clothing Line from Schedule A/B: 11.1   | \$200.00                             |     | \$200.00  | RSMo § 513.430.1(1)                |  |  |  |  |  |
|    | Line Holli Schedule AV.B. 1111  |                                      |     | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |  |  |
|    | 3 Watches - \$75; Misc. jewelry - \$50<br>Line from Schedule A/B: 12.1  | \$125.00                             |     | \$125.00  | RSMo § 513.430.1(2)                |  |  |  |  |  |
|    | LINE HOTH SCHEUUIE PAD. 12.1  |                                      |     | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |  |  |

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the Amount of the exemption you claim portion you own |         |   | Specific laws that allow exemption |
|---|--|---------|---|------------------------------------|
|   | Copy the value from<br>Schedule A/B                                    | Che     | ck only one box for each exemption.                             |                                    |
| Cash Line from Schedule A/B: 16.1   | \$40.00  |         | \$40.00   | RSMo § 513.430.1(3)                |
| Ellio II oli II osii osii osii osii osii osii osii                                  |  |         | 100% of fair market value, up to any applicable statutory limit |                                    |
| Checking: Great Southern Bank Line from Schedule A/B: 17.1                          | \$76.00  |         | \$76.00   | RSMo § 513.430.1(3)                |
|   |  |         | 100% of fair market value, up to any applicable statutory limit |                                    |
| Health Savings: HSA Account Line from Schedule A/B: 17.2                            | \$500.00   |         | \$484.00  | RSMo § 513.430.1(3)                |
| Enternolli dolloddio 702.   |  |         | 100% of fair market value, up to any applicable statutory limit |                                    |
| Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every  |  |         | led on or after the date of adjustmen                           | nt.)                               |
| Yes. Did you acquire the property cover   | red by the exemption wi  | ithin 1 | 215 days before you filed this case                             | ?                                  |
| □ No  |  |         |   |                                    |
| ☐ Yes   |  |         |   |                                    |

|   |                     | Document   | Page 21             | of 48                               |  |                          |
|---|---------------------|--|---------------------|-------------------------------------|--|--------------------------|
| Fill in this information                      | to identify you     | r case:  |                     |                                     |  |                          |
| Debtor 1 Sh                                   | elly Ann O'Br       | ien  |                     |                                     |  |                          |
|   | t Name              | Middle Name  | Last Name           |                                     |  |                          |
| Debtor 2 (Spouse if, filing) First            | t Name              | Middle Name  | Last Name           |                                     |  |                          |
| United States Bankrupt                        | cy Court for the:   | WESTERN DISTRICT OF MIS  | SOURI               |                                     |  |                          |
| Case number                                   |                     |  |                     |                                     |  |                          |
| (if known)                                    |                     |  |                     |                                     | ☐ Check                                | if this is an            |
|   |                     |  |                     |                                     | ameno                                  | led filing               |
| Official Form 10                              | 6D                  |  |                     |                                     |  |                          |
|   |                     | Who Have Claims  | Socured             | hy Proporty                         |  | 12/15                    |
| Scriedule D. (                                | <u> </u>            | WITO Have Claims   | <del>Jecui eu</del> | by Fropert                          | <u>y</u>                               | 12/13                    |
|   |                     | f two married people are filing togetl<br>out, number the entries, and attach it       |                     |                                     |  |                          |
| 1. Do any creditors have o                    | claims secured by   | your property?   |                     |                                     |  |                          |
| ☐ No. Check this b                            | oox and submit th   | is form to the court with your other   | r schedules. Yo     | u have nothing else to              | report on this form.                   |                          |
| Yes. Fill in all of                           |                     |  |                     |                                     |  |                          |
| Part 1: List All Secu                         | ured Claims         |  |                     |                                     |  |                          |
|   |                     | nore than one secured claim, list the cre  | editor separately   | Column A                            | Column B                               | Column C                 |
| for each claim. If more tha                   | an one creditor has | a particular claim, list the other creditor cal order according to the creditor's name | rs in Part 2. As    | Amount of claim Do not deduct the   | Value of collateral that supports this | Unsecured portion        |
| 2.1 Ally Financial                            |                     | Describe the property that secures   | the claim:          | value of collateral.<br>\$22,554.00 | claim<br>\$15,444.00                   | If any <b>\$7,110.00</b> |
| Creditor's Name                               |                     | 2012 Nissan Frontier 58,000  | ) miles             |                                     |  |                          |
| Arra Baata ar                                 |                     |  |                     |                                     |  |                          |
| Attn: Bankrupt<br>Po Box 380901               | -                   | As of the date you file, the claim is: Check all that                                  |                     |                                     |  |                          |
| Bloomington, I                                |                     | apply.  Contingent   |                     |                                     |  |                          |
| Number, Street, City, St                      |                     | ☐ Unliquidated   |                     |                                     |  |                          |
|   | ·                   | ☐ Disputed   |                     |                                     |  |                          |
| Who owes the debt? Ch                         | heck one.           | Nature of lien. Check all that apply.  |                     |                                     |  |                          |
| Debtor 1 only                                 |                     | ☐ An agreement you made (such as   | mortgage or secu    | ured                                |  |                          |
| Debtor 2 only                                 |                     | car loan)  |                     |                                     |  |                          |
| Debtor 1 and Debtor 2                         | only                | ☐ Statutory lien (such as tax lien, me   | echanic's lien)     |                                     |  |                          |
| At least one of the debtors and another  Udgm |                     | ☐ Judgment lien from a lawsuit   |                     |                                     |  |                          |
| Check if this claim rel                       | lates to a          | ☐ Other (including a right to offset)  |                     |                                     |  |                          |
|   | Opened              |  |                     |                                     |  |                          |
|   | 11/17 Last          |  |                     |                                     |  |                          |
| Date debt was incurred                        | Active<br>4/30/18   | Last 4 digits of account num   | nber 6346           |                                     |  |                          |
|   |                     | •  |                     |                                     |  |                          |

Add the dollar value of your entries in Column A on this page. Write that number here: \$22,554.00 If this is the last page of your form, add the dollar value totals from all pages. \$22,554.00 Write that number here:

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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|  |   |   | D  | ocument  | Page 22   | 2 of 48  |   |  |
|--|---|---|--|--|---|--|---|--|
| Fill in thi  | is informati                                  | ion to identify your c  | ase:   |  |   |  |   |  |
| Debtor 1   |   | Shelly Ann O'Brie   | n  |  |   |  |   |  |
| DODIO! 1   |   | First Name  | Middle Nam   | ne .   | Last Name   |  |   |  |
| Debtor 2   |   |   |  |  |   |  |   |  |
| (Spouse if, f  | iling)  | First Name  | Middle Nam   | ie   | Last Name   |  |   |  |
| United St  | tates Bankrı                                  | uptcy Court for the:  | WESTERN D  | ISTRICT OF MI  | ISSOURI   |  |   |  |
|  |   | . ,   |  |  |   |  |   |  |
| Case nur   | mber  |   |  |  |   |  |   | 01 1 1/41 1  |
| (II Known)   |   |   |  |  |   |  |   | Check if this is an  |
|  |   |   |  |  |   |  |   | amended filing   |
| Officia  | l Form 1                                      | 06E/F   |  |  |   |  |   |  |
|  |   | : Creditors W   | ho Have l  | Insecured  | d Claims  |  |   | 12/15  |
| any execut<br>Schedule (<br>Schedule I<br>left. Attach | tory contract<br>G: Executory<br>D: Creditors | s or unexpired leases to<br>Contracts and Unexpir<br>Who Have Claims Secu<br>nation Page to this page | that could result<br>red Leases (Offi-<br>ired by Property | in a claim. Also<br>cial Form 106G).<br>. If more space is | list executory of<br>Do not include<br>s needed, copy | contracts on Schedule A/<br>any creditors with partia<br>the Part you need, fill it o        | B: Property (Of<br>lly secured clain<br>out, number the | claims. List the other party to<br>ficial Form 106A/B) and on<br>ms that are listed in<br>entries in the boxes on the<br>Iditional pages, write your |
| Part 1:  | List All of                                   | Your PRIORITY Uns   | secured Claim  | s  |   |  |   |  |
| 1. Do an   | y creditors l                                 | nave priority unsecured   | l claims against   | you?   |   |  |   |  |
| ■ No   | . Go to Part 2                                | 2.  |  |  |   |  |   |  |
| ☐ Ye   | s.  |   |  |  |   |  |   |  |
| Part 2:  | List All of                                   | Your NONPRIORITY  | Y Unsecured C  | laims  |   |  |   |  |
| 3. Do an   | y creditors l                                 | nave nonpriority unsecu   | ured claims agai   | inst you?  |   |  |   |  |
| □ No   | o. You have n                                 | othing to report in this pa   | art. Submit this for                                       | m to the court wit   | th vour other sche                                    | edules.  |   |  |
| ■ Ye   |   | 2   |  |  | ,               |  |   |  |
| unsec  | ured claim, list<br>one creditor h            | st the creditor separately  | for each claim. F  | or each claim liste  | ed, identify what t                                   | b holds each claim. If a cr<br>type of claim it is. Do not lis<br>three nonpriority unsecure | st claims already                                       | included in Part 1. If more  |
|  |   |   |  |  |   |  |   | Total claim  |
| 4.1 <b>E</b>   | Barclays F                                    | Bank Delaware   | L  | ast 4 digits of ac   | count number  | 2658   |   | \$1,478.00   |
|  |   | editor's Name   |  | <b>.</b>   |   |  |   |  |
|  |   | espondence  |  |  |   | Opened 11/13 La  | st Active   |  |
|  | Po Box 88                                     |   | V  | When was the del   | bt incurred?  | 3/11/18  |   |  |
|  |   | n, DE 19899<br>t City State Zlp Code  |  | s of the date you  | u file, the claim i                                   | is: Check all that apply   |   |  |
|  |   | I the debt? Check one.  |  |  | c,c c.a   | on one an that apply   |   |  |
| ı  | ■ Debtor 1 o                                  | nly   | г  | Contingent   |   |  |   |  |
|  | Debtor 2 o                                    | •   |  | Unliquidated   |   |  |   |  |
|  |   | -   |  |  |   |  |   |  |
|  |   | nd Debtor 2 only  |  | Disputed  ype of NONPRIC                                   | DITY unsecure   | d claim:   |   |  |
|  |   | e of the debtors and ano  | u ici  | Student loans  | unscoule  | a vidiiii.   |   |  |
|  | 」 Check if tI<br>lebt                         | nis claim is for a comm   | iunity   |  | sing out of a ac                                      | aration agreement or divorc  | o that va 4:4   | 54   |
|  |   | ubject to offset?   |  | ■ Obligations ariseport as priority cl                     |   | nanon agreement or divorc  | e mai you did no  | JL   |
| _  | No  |   |  |  |   | ng plans, and other similar  | debts   |  |
|  | ☐ Yes   |   |  | Other. Specify   |   |  |   |  |
| •  | 00  |   | •  | - Other, Specify   | 2.22 0410   | -  |   |  |

|  | Case Humber (II know)   |   |
|--|---|---|
| Last 4 digits of account number                            | 0477  | \$4,651.00  |
| When was the debt incurred?                                | Opened 12/13 Last Active 3/09/18  |   |
| As of the date you file, the claim                         | is: Check all that apply  |   |
|  |   |   |
| ☐ Contingent   |   |   |
| ☐ Unliquidated   |   |   |
| ☐ Disputed   |   |   |
| <u></u> '  | d claim:  |   |
| _  |   |   |
|  | ration agreement or divorce that you did not  |   |
| <u></u>  | g plans, and other similar debts  |   |
| Other. Specify Credit Card                                 | <u> </u>  |   |
| Last 4 digits of account number                            | 5911  | \$1,205.00  |
| When was the debt incurred?                                | Opened 04/15 Last Active 4/22/18  |   |
| = A. (6) - Let 61- (11-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-      |   |   |
| As of the date you file, the claim                         | s: Check all that apply   |   |
| ☐ Contingent   |   |   |
|  |   |   |
|  |   |   |
| •  | d claim:  |   |
| ☐ Student loans  |   |   |
| Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not   |   |
| Debts to pension or profit-sharing                         | g plans, and other similar debts  |   |
| Other. Specify Charge Acc                                  | count   |   |
| Last 4 digits of account number                            | 2004  | \$984.00  |
| When was the debt incurred?                                | Opened 01/16 Last Active 3/02/18  |   |
| As of the date you file, the claim                         | is: Chook all that apply  |   |
| As of the date you me, the claim                           | в. Спеск ан так арру  |   |
| ☐ Contingent   |   |   |
|  |   |   |
| `  |   |   |
| ·  | d claim:  |   |
| ☐ Student loans ☐ Obligations arising out of a sepa        | ration agreement or divorce that you did not  |   |
| report as priority claims                                  |   |   |
| · ·  | • •   |   |
| ■ Other Specify Charge Acc                                 | count   |   |
|  | When was the debt incurred?  As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharin Other. Specify Credit Carc Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharin Other. Specify Charge Acc Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharin | When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Other. Specify Credit Card  Last 4 digits of account number Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Other. Specify Credit Card  Last 4 digits of account number Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Charge Account  Last 4 digits of account number Opened 01/16 Last Active 3/02/18  As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Opened 01/16 Last Active 3/02/18  As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims |

| Debt | or 1 Shelly Ann O'Brien   |  | Case number (if know)                                     |            |
|------|---|--|---|------------|
| 4.5  | Credit One Bank   | Last 4 digits of account number  | 0720  | \$1,976.00 |
|      | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 98873 Las Vegas, NV 89193 Number Street City State Zlp Code                 | When was the debt incurred?  As of the date you file, the claim                                  | Opened 12/12 Last Active 3/11/18 is: Check all that apply |            |
|      | Who incurred the debt? Check one.  Debtor 1 only  | ☐ Contingent   |   |            |
|      | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community | ☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured ☐ Student loans                         | d claim:  |            |
|      | debt Is the claim subject to offset?  ■ No  | ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharin | aration agreement or divorce that you did not             |            |
|      | ☐ Yes   | ■ Other. Specify Credit Card   | <u> </u>  |            |
| 4.6  | Credit One Bank Nonpriority Creditor's Name   | Last 4 digits of account number  | 1816  | \$875.00   |
|      | Attn: Bankruptcy<br>Po Box 98873<br>Las Vegas, NV 89193   | When was the debt incurred?  | Opened 06/17 Last Active 2/25/18                          |            |
|      | Number Street City State Zlp Code  Who incurred the debt? Check one.  | As of the date you file, the claim   | is: Check all that apply                                  |            |
|      | ■ Debtor 1 only   | Contingent   |   |            |
|      | Debtor 2 only   | Unliquidated   |   |            |
|      | Debtor 1 and Debtor 2 only  | Disputed   | d alata.  |            |
|      | At least one of the debtors and another   | Type of NONPRIORITY unsecured  ☐ Student loans   | d claim:  |            |
|      | ☐ Check if this claim is for a community debt  Is the claim subject to offset?  | _  | aration agreement or divorce that you did not             |            |
|      | ■ No  | Debts to pension or profit-sharing   | g plans, and other similar debts                          |            |
|      | Yes   | ■ Other. Specify Credit Card   | l   |            |
| 4.7  | Linda O'Brien Nonpriority Creditor's Name   | Last 4 digits of account number  |   | \$696.00   |
|      | 4205 Jenny Lind Fort Smith, AR 72901 Number Street City State Zlp Code  | When was the debt incurred?  As of the date you file, the claim                                  | 2017 is: Check all that apply                             |            |
|      | Who incurred the debt? Check one.  Debtor 1 only  | Пол  |   |            |
|      |   | ☐ Contingent   |   |            |
|      | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only  | ☐ Unliquidated   |   |            |
|      | ☐ At least one of the debtors and another   | ☐ Disputed  Type of NONPRIORITY unsecure   | d claim:  |            |
|      | ☐ At least one or the debtors and another ☐ Check if this claim is for a community debt   | Student loans  | ration agreement or divorce that you did not              |            |
|      | Is the claim subject to offset?   | report as priority claims  | nation agreement or divorce that you did not              |            |
|      | ■ No  | Debts to pension or profit-sharing   | g plans, and other similar debts                          |            |
|      | ☐ Yes   | Other. Specify personal lo   | an  |            |

| Debt     | Snelly Ann O'Brien  |   | Case number (if know)                              |            |  |  |  |
|----------|---|---|--|------------|--|--|--|
| 4.8      | Synchrony Bank/ JC Penneys  | Last 4 digits of account number   | 3497   | \$2,526.00 |  |  |  |
|          | Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896       | When was the debt incurred?   | Opened 08/13 Last Active 3/11/18                   |            |  |  |  |
|          | Number Street City State Zlp Code   | As of the date you file, the claim  | is: Check all that apply                           |            |  |  |  |
|          | Who incurred the debt? Check one.   | _   |  |            |  |  |  |
|          | Debtor 1 only   | Contingent  |  |            |  |  |  |
|          | Debtor 2 only   | ☐ Unliquidated  |  |            |  |  |  |
|          | Debtor 1 and Debtor 2 only  | ☐ Disputed  |  |            |  |  |  |
|          | At least one of the debtors and another   | Type of NONPRIORITY unsecure  | d claim:   |            |  |  |  |
|          | ☐ Check if this claim is for a community debt   |   | ration agreement or divorce that you did not       |            |  |  |  |
|          | Is the claim subject to offset?   | report as priority claims   |  |            |  |  |  |
|          | ■ No  | Debts to pension or profit-sharing  |  |            |  |  |  |
|          | Yes   | Other. Specify Charge Acc   | count  |            |  |  |  |
| 4.9      | Synchrony Bank/Sams Nonpriority Creditor's Name   | Last 4 digits of account number   | 6380   | \$1,061.00 |  |  |  |
|          | Attn: Bankruptcy Po Box 965060 Orlando, FL 32896  | When was the debt incurred?   | Opened 11/15 Last Active 3/11/18                   |            |  |  |  |
|          | Number Street City State Zlp Code Who incurred the debt? Check one.                     | As of the date you file, the claim  | is: Check all that apply                           |            |  |  |  |
|          | Debtor 1 only   | ☐ Contingent  |  |            |  |  |  |
|          | Debtor 2 only   | ☐ Unliquidated  |  |            |  |  |  |
|          | Debtor 1 and Debtor 2 only  |   |  |            |  |  |  |
|          | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecure  | d claim:   |            |  |  |  |
|          | ☐ Check if this claim is for a community  | ☐ Student loans   |  |            |  |  |  |
|          | debt Is the claim subject to offset?  | ☐ Obligations arising out of a separeport as priority claims                  | a separation agreement or divorce that you did not |            |  |  |  |
|          | ■ No  | Debts to pension or profit-sharing  | g plans, and other similar debts                   |            |  |  |  |
|          | Yes   | Other. Specify Charge Acc   | count  |            |  |  |  |
| 4.1<br>0 | Synchrony Bank/Walmart  | Last 4 digits of account number   | 7777   | \$1,713.00 |  |  |  |
|          | Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965060                         | When was the debt incurred?   | Opened 08/14 Last Active 3/11/18                   |            |  |  |  |
|          | Orlando, FL 32896  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim  | is: Check all that apply                           |            |  |  |  |
|          | Debtor 1 only   | ☐ Contingent  |  |            |  |  |  |
|          | Debtor 2 only   | ☐ Unliquidated  |  |            |  |  |  |
|          | Debtor 1 and Debtor 2 only  | ☐ Disputed  |  |            |  |  |  |
|          | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecure  | d claim:   |            |  |  |  |
|          | ☐ Check if this claim is for a community debt   | <ul><li>☐ Student loans</li><li>☐ Obligations arising out of a sepa</li></ul> |  |            |  |  |  |
|          | Is the claim subject to offset?   | report as priority claims   |  |            |  |  |  |
|          | ■ No  | Debts to pension or profit-sharing  |  |            |  |  |  |
|          | ☐ Yes ☐ Other. Specify Charge Account   |   |  |            |  |  |  |

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| Shelly Ann O'Brien                           | Shelly Ann O Brien   |  |            |
|--|--|--|------------|
| Tower Loan                                   | Last 4 digits of account number                            | 5826   | \$1,136.00 |
| Nonpriority Creditor's Name                  | When was the debt incurred?                                | 2/2049                                       |            |
| 218-B South Village Center<br>Nixa. MO 65714 | when was the debt incurred?                                | 3/2018                                       |            |
| Number Street City State Zlp Code            | As of the date you file, the claim                         | is: Check all that apply                     |            |
| Who incurred the debt? Check one.            |  |  |            |
| ■ Debtor 1 only                              | ☐ Contingent   |  |            |
| ☐ Debtor 2 only                              | ☐ Unliquidated   |  |            |
| ☐ Debtor 1 and Debtor 2 only                 | ☐ Disputed   |  |            |
| ☐ At least one of the debtors and another    | Type of NONPRIORITY unsecured                              | d claim:                                     |            |
| ☐ Check if this claim is for a community     | ☐ Student loans  |  |            |
| debt<br>Is the claim subject to offset?      | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not |            |
| No   | Debts to pension or profit-sharing                         | g plans, and other similar debts             |            |
| Yes  | Other. Specify Signature L                                 | _oan   |            |

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|              |     |   |     | •  | Total Claim |
|--------------|-----|---|-----|----|-------------|
|              | 6a. | Domestic support obligations  | 6a. | \$ | 0.00        |
| Total claims |     |   |     |    |             |
| from Part 1  | 6b. | Taxes and certain other debts you owe the government  | 6b. | \$ | 0.00        |
|              | 6c. | Claims for death or personal injury while you were intoxicated  | 6c. | \$ | 0.00        |
|              | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. | \$ | 0.00        |
|              | 6e. | Total Priority. Add lines 6a through 6d.  | 6e. | \$ | 0.00        |
|              |     |   |     |    | Total Claim |
|              | 6f. | Student loans   | 6f. | \$ | 0.00        |
| Total claims |     |   |     |    |             |
| from Part 2  | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00        |
|              | 6h. | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$ | 0.00        |
|              | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. | \$ | 18,301.00   |
|              | 6j. | Total Nonpriority. Add lines 6f through 6i.   | 6j. | \$ | 18,301.00   |

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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| Fill in this infor  | rmation to identify your | case:              | V           |  |
|---------------------|--------------------------|--------------------|-------------|--|
| Debtor 1            | Shelly Ann O'Brid        | en                 |             |  |
|                     | First Name               | Middle Name        | Last Name   |  |
| Debtor 2            |                          |                    |             |  |
| (Spouse if, filing) | First Name               | Middle Name        | Last Name   |  |
| United States B     | ankruptcy Court for the: | WESTERN DISTRICT O | OF MISSOURI |  |
| Case number         |                          |                    |             |  |
| (if known)          |                          |                    |             |  |
|                     |                          |                    |             |  |

### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or | company with | h whom you have the<br>er, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|--|-------------------|---|
| 2.1 |           |              |  |                   |   |
|     | Name      |              |  |                   | _                                       |
|     | Number    | Street       |  |                   | _                                       |
|     | City      |              | State  | ZIP Code          | <del>_</del>                            |
| 2.2 |           |              |  |                   |   |
|     | Name      |              |  |                   |   |
|     | Number    | Street       |  |                   | _                                       |
|     | City      |              | State  | ZIP Code          |   |
| 2.3 | <u> </u>  |              | Otato  | 2 0000            |   |
|     | Name      |              |  |                   |   |
|     | Number    | Street       |  |                   | _                                       |
|     | City      |              | State  | ZIP Code          | <del>_</del>                            |
| 2.4 |           |              |  |                   |   |
|     | Name      |              |  |                   | _                                       |
|     | Number    | Street       |  |                   | _                                       |
|     | City      |              | State  | ZIP Code          | <del>_</del>                            |
| 2.5 | · ·       |              |  |                   |   |
|     | Name      |              |  |                   | _                                       |
|     | Number    | Street       |  |                   | _                                       |
|     | City      |              | State  | ZIP Code          | <del>_</del>                            |
|     | J.1.5     |              | Cidio  |                   |   |

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|   |  | Documen   | il raye 20 01 2                                       | +0   |  |
|---|--|---|---|--|--|
| Fill in this                              | s information to identify your                                       | case:   |   |  |  |
| Debtor 1                                  | Shelly Ann O'Brie  | en  |   |  |  |
|   | First Name   | Middle Name   | Last Name   |  |  |
| Debtor 2<br>(Spouse if, fi                | ling) First Name   | Middle Name   | Last Name   |  |  |
| United Sta                                | ates Bankruptcy Court for the:                                       | WESTERN DISTRICT O  | F MISSOURI  |  |  |
| Case num                                  | nber   |   |   |  | ☐ Check if this is an amended filing   |
|   | al Form 106H<br>dule H: Your Cod                                     | ebtors  |   |  | 12/15  |
| people are<br>fill it out, a<br>your name | e filing together, both are equa                                     | ally responsible for suppl<br>boxes on the left. Attach<br>. Answer every question. | lying correct information<br>the Additional Page to t | n. If more space is n<br>his page. On the top                  | ate as possible. If two married<br>needed, copy the Additional Page,<br>p of any Additional Pages, write     |
|   | , ,  | , ou are illing a joint oace, a   | o not not ounce operate at                            | u 000001011  |  |
| □ No<br>■ Ye                              |  |   |   |  |  |
|   | thin the last 8 years, have you<br>na, California, Idaho, Louisiana, |   |   |  |  |
|   | o. Go to line 3.   |   |   |  |  |
| □ Ye                                      | es. Did your spouse, former spou                                     | ise, or legal equivalent live   | with you at the time?                                 |  |  |
| in lin<br>Form                            | e 2 again as a codebtor only i                                       | that person is a guarant  | or or cosigner. Make sur                              | re you have listed th  | g with you. List the person showr<br>he creditor on Schedule D (Officia<br>Schedule E/F, or Schedule G to fi |
|   | Column 1: Your codebtor<br>Name, Number, Street, City, State and ZI  | P Code  |   | Column 2: The cre<br>Check all schedule                        | editor to whom you owe the debt es that apply:   |
| 3.1                                       | Jane Massey<br>1001 N. 24th St.<br>Ozark, MO 65721                   |   |   | ■ Schedule D, li □ Schedule E/F, □ Schedule G _ Ally Financial | ine <b>2.1</b>   |

|             |   |   |  |            |      | -           |                      |                          |                              |          |
|-------------|---|---|--|------------|------|-------------|----------------------|--------------------------|------------------------------|----------|
|             | in this information to identify your otor 1 Shelly Ann  |   |  |            |      |             |                      |                          |                              |          |
| Del         | otor 2  |   |  |            | _    |             |                      |                          |                              |          |
|             | ted States Bankruptcy Court for th  | e: WESTERN DISTRIC                                      | T OF MISSOURI  |            |      |             |                      |                          |                              |          |
|             | se number   |   | -  |            |      | □ Ar        |                      | ed filing<br>ent showin  | g postpetition               | •        |
| 0           | fficial Form 106I   |   |  |            |      | MI          | M / DD/ Y            | YYY                      |                              |          |
| S           | chedule I: Your Inc   | ome   |  |            |      |             |                      |                          |                              | 12/15    |
| spo<br>atta | plying correct information. If you use. If you are separated and you ch a separate sheet to this form  t1: Describe Employment  Fill in your employment | ur spouse is not filing w<br>. On the top of any additi | ith you, do not incluing the policy of the p | ıde infor  | mati | on about    | your spo<br>mber (if | ouse. If mo<br>known). A | ore space is<br>answer every | needed,  |
|             | information.  |   | Debtor 1   |            |      |             |                      |                          | ling spouse                  |          |
|             | If you have more than one job, attach a separate page with information about additional   | Employment status                                       | <ul><li>■ Employed</li><li>□ Not employed</li></ul>  |            |      |             | ☐ Emplo              | •                        |                              |          |
|             | employers.  | Occupation  | Insurance Supp   | ort Re     | )    |             |                      |                          |                              |          |
|             | Include part-time, seasonal, or self-employed work.   | Employer's name   | Enterprise Holo  | dings, Ir  | ıc.  |             |                      |                          |                              |          |
|             | Occupation may include student or homemaker, if it applies.   | Employer's address                                      | 8421 St. John II<br>Saint Louis, MC  |            |      |             |                      |                          |                              |          |
|             |   | How long employed t                                     | here? <u>1/23/20</u>   | 17         |      |             | _                    |                          |                              |          |
| Par         | t 2: Give Details About Mo  | onthly Income   |  |            |      |             |                      |                          |                              |          |
|             | mate monthly income as of the use unless you are separated.   | date you file this form. If                             | you have nothing to r  | eport for  | any  | line, write | \$0 in the           | space. Inc               | clude your no                | n-filing |
|             | u or your non-filing spouse have n<br>e space, attach a separate sheet t  |   | ombine the informatio  | on for all | empl | oyers for t | hat perso            | n on the li              | nes below. If                | you need |
|             |   |   |  |            |      | For Deb     | tor 1                |                          | btor 2 or<br>ing spouse      |          |
| 2.          | List monthly gross wages, sal deductions). If not paid monthly  |   |  | 2.         | \$   | 2,          | 705.69               | \$                       | N/A                          |          |
| 3.          | Estimate and list monthly over  | rtime pay.  |  | 3.         | +\$  |             | 0.00                 | +\$                      | N/A                          |          |
| 4.          | Calculate gross Income. Add   | ine 2 + line 3.   |  | 4.         | \$   | 2,70        | 5.69                 | \$                       | N/A                          |          |

| Debt | or 1                          | Shelly Ann O'Brien   | -        | Case r | number (if known) |             |                              |                       |
|------|-------------------------------|--|----------|--------|-------------------|-------------|------------------------------|-----------------------|
|      |                               |  |          | For    | Debtor 1          |             | Debtor 2 or<br>-filing spous | se                    |
|      | Cop                           | by line 4 here   | 4.       | \$     | 2,705.69          | \$          |                              | /A                    |
| 5.   | List                          | all payroll deductions:  |          |        |                   |             |                              |                       |
|      | 5a.                           | Tax, Medicare, and Social Security deductions  | 5a.      | \$     | 456.00            | \$          | N                            | /A                    |
|      | 5b.                           | Mandatory contributions for retirement plans   | 5b.      | \$     | 0.00              | \$          |                              | / <u>A</u>            |
|      | 5c.                           | Voluntary contributions for retirement plans   | 5c.      | \$     | 0.00              | \$          |                              | /A                    |
|      | 5d.                           | Required repayments of retirement fund loans   | 5d.      | \$     | 0.00              | \$          |                              | /A                    |
|      | 5e.                           | Insurance  | 5e.      | \$     | 210.46            | \$          | N                            | /A                    |
|      | 5f.                           | Domestic support obligations   | 5f.      | \$     | 0.00              | \$          |                              | /A                    |
|      | 5g.                           | Union dues   | 5g.      | \$     | 0.00              | \$          |                              | /A                    |
|      | 5h.                           | Other deductions. Specify:   | 5h.+     | • \$   | 0.00              | + \$        | N                            | <u>/A</u>             |
| 6.   | Add                           | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.   | 6.       | \$     | 666.46            | \$          | N                            | <u>/A</u>             |
| 7.   | Cal                           | culate total monthly take-home pay. Subtract line 6 from line 4.   | 7.       | \$     | 2,039.23          | \$          | N                            | <u>/A</u>             |
| 8.   | List<br>8a.                   | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total                |          |        |                   |             |                              |                       |
|      |                               | monthly net income.  | 8a.      | \$     | 0.00              | \$          | N                            | /A                    |
|      | 8b.                           | Interest and dividends   | 8b.      | \$     | 0.00              | \$          |                              | /A                    |
|      | 8c.                           | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.   | 8c.      | \$     | 0.00              | \$          | N                            | /A                    |
|      | 8d.                           | Unemployment compensation  | 8d.      | \$     | 0.00              | <u>\$</u> — |                              | / <u>A</u>            |
|      | 8e.                           | Social Security  | 8e.      | \$     | 0.00              | \$          |                              | /A                    |
|      | 8f.                           | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:    | e<br>8f. | \$     | 0.00              | \$          |                              | /A_                   |
|      | 8g.                           | Pension or retirement income   | 8g.      | \$     | 0.00              | \$          | N                            | /A                    |
|      | 8h.                           | Other monthly income. Specify:   | _ 8h.+   | • \$   | 0.00              | + \$        | N                            | <u>/A</u>             |
| 9.   | Add                           | d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.   | 9.       | \$     | 0.00              | \$          | ı                            | N/A                   |
| 10.  | Calo                          | culate monthly income. Add line 7 + line 9.  | 10. \$   |        | 2,039.23 + \$     |             | N/A = \$                     | 2,039.23              |
|      |                               | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.   |          |        | -                 |             |                              |                       |
| 11.  | Stat<br>Inclu<br>othe<br>Do n | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not excify: | depen    |        | ,                 | •           | chedule J.<br>11. +\$        | 0.00                  |
| 12.  |                               | If the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certailies   |          |        |                   |             | 12. \$_                      | 2,039.23              |
|      |                               |  |          |        |                   |             |                              | ibined<br>thly income |
| 13.  | Do :                          | you expect an increase or decrease within the year after you file this form  | ?        |        |                   |             | mon                          | uny moonie            |
|      |                               | No.  |          |        |                   |             |                              |                       |
|      | 1.1                           | Yes, Explain:  |          |        |                   |             |                              |                       |

Official Form 106I Schedule I: Your Income page 2

| Filli  | in this information to identify your case:   |                                    |                       |                 |                    |   |
|--------|--|------------------------------------|-----------------------|-----------------|--------------------|---|
| Debt   | tor 1 Shelly Ann O'Brien   |                                    |                       | Check           | t if this is:      |   |
| D-1-4  |  |                                    | -                     | _               | An amended filing  | Zananata (CC) a abantan                       |
|        | tor 2buse, if filing)  |                                    |                       |                 |                    | ving postpetition chapter the following date: |
|        | WESTERN S  | 21072107 05 141000                 | . In                  | _               |                    |   |
| Unite  | ed States Bankruptcy Court for the: WESTERN D  | DISTRICT OF MISSO                  | URI                   | Ņ               | MM / DD / YYYY     |   |
| 1      | e number   |                                    |                       |                 |                    |   |
| (II KI | nowny  |                                    |                       |                 |                    |   |
| Of     | fficial Form 106 I   |                                    |                       |                 |                    |   |
|        | fficial Form 106J  | •                                  |                       |                 |                    |   |
|        | chedule J: Your Expense<br>as complete and accurate as possible. If tw                                     |                                    | a filing together be  | oth are equa    | lly responsible fo | 12/15   |
| info   | ormation. If more space is needed, attach an<br>nber (if known). Answer every question.                    |                                    |                       |                 |                    |   |
| Part   |  |                                    |                       |                 |                    |   |
| 1.     | Is this a joint case?  |                                    |                       |                 |                    |   |
|        | No. Go to line 2.  |                                    |                       |                 |                    |   |
|        | Yes. Does Debtor 2 live in a separate h  | ousehold?                          |                       |                 |                    |   |
|        | □ No   | 10010 5                            | ( O ( 11              |                 |                    |   |
|        | ☐ Yes. Debtor 2 must file Official Fo  | rm 106J-2, <i>Expenses</i>         | tor Separate House    | enola of Debto  | or 2.              |   |
| 2.     | Do you have dependents? ■ No   |                                    |                       |                 |                    |   |
|        |  | out this information for dependent | Dependent's relati    |                 | Dependent's age    | Does dependent live with you?                 |
|        | 505.01 2.  | r dependent                        | Debitor 1 of Debtor   | 2               | aye                |   |
|        | Do not state the dependents names.   |                                    |                       |                 |                    | □ No<br>□ Yes                                 |
|        |  |                                    | -                     |                 |                    | □ No  |
|        |  |                                    |                       |                 |                    | ☐ Yes   |
|        |  |                                    |                       |                 |                    | □ No  |
|        |  |                                    |                       |                 |                    | ☐ Yes   |
|        |  |                                    |                       |                 |                    | □ No  |
| 3.     | Do your expenses include   |                                    |                       |                 |                    | ☐ Yes   |
| Э.     | expenses of people other than  |                                    |                       |                 |                    |   |
|        | yourself and your dependents?  |                                    |                       |                 |                    |   |
|        | t 2: Estimate Your Ongoing Monthly Ex  |                                    |                       |                 |                    |   |
| exp    | imate your expenses as of your bankruptcy<br>enses as of a date after the bankruptcy is f<br>licable date. |                                    |                       |                 |                    |   |
| Incl   | lude expenses paid for with non-cash gove  | rnment assistance if               | you know              |                 |                    |   |
|        | value of such assistance and have include<br>ficial Form 106I.)  | d it on Schedule I: Y              | our Income            |                 | Your expe          | enses   |
| (0     | noidi i omi roon,  |                                    |                       |                 |                    |   |
| 4.     | The rental or home ownership expenses f payments and any rent for the ground or lot.                       | or your residence. In              | nclude first mortgage | 4. \$           |                    | 375.00  |
|        | If not included in line 4:   |                                    |                       |                 |                    |   |
|        | 4a. Real estate taxes  |                                    |                       | 4a. \$          |                    | 0.00  |
|        | 4b. Property, homeowner's, or renter's ins   | urance                             |                       | 4b. \$          |                    | 38.50   |
|        | 4c. Home maintenance, repair, and upkee  |                                    |                       | 4c. \$          |                    | 0.00  |
| 5.     | 4d. Homeowner's association or condomin<br>Additional mortgage payments for your re                        |                                    | mo oquity loons       | 4d. \$<br>5. \$ |                    | 0.00  |
| J.     | Auditional mortgage payments for your re   | solucilee, such as not             | HE EQUITY TOOMS       | ე. ֆ            |                    | 0.00  |

| ebtor 1 | Shelly Ann O'Brien   | Case num | ber (if known) |                         |
|---------|--|----------|----------------|-------------------------|
| . Utili | tios:  |          |                |                         |
| 6a.     | Electricity, heat, natural gas   | 6a.      | \$             | 0.00                    |
| 6b.     | Water, sewer, garbage collection   | 6b.      | \$             | 85.00                   |
| 6c.     | Telephone, cell phone, Internet, satellite, and cable services   | 6c.      | \$             | 0.00                    |
| 6d.     | Other Cresity Fl.  | 6d.      | ·              | 125.00                  |
|         | Gas  |          | \$             | 65.00                   |
|         | DirecTV  |          | \$             | 84.13                   |
|         | Cell Phone   |          | \$             | 100.00                  |
|         | Internet   |          | \$             | 76.33                   |
| Foo     | d and housekeeping supplies  |          | \$             | 240.00                  |
|         | dcare and children's education costs   | 8.       | \$             | 0.00                    |
|         | hing, laundry, and dry cleaning  | 9.       | \$             | 40.00                   |
|         | sonal care products and services   | 10.      | \$             | 75.00                   |
|         | ical and dental expenses   | 11.      | ·              | 0.00                    |
|         | sportation. Include gas, maintenance, bus or train fare.   |          | <u> </u>       | 0.00                    |
|         | not include car payments.  | 12.      | \$             | 100.00                  |
|         | ertainment, clubs, recreation, newspapers, magazines, and books  | 13.      | \$             | 0.00                    |
|         | ritable contributions and religious donations  | 14.      | \$             | 0.00                    |
|         | rance.   |          |                |                         |
|         | ot include insurance deducted from your pay or included in lines 4 or 20.  |          |                |                         |
|         | Life insurance   | 15a.     | ·              | 0.00                    |
| 15b.    | Health insurance   | 15b.     | \$             | 0.00                    |
| 15c.    | Vehicle insurance  | 15c.     | \$             | 129.84                  |
| 15d.    | Other insurance. Specify:  | 15d.     | \$             | 0.00                    |
|         | es. Do not include taxes deducted from your pay or included in lines 4 or 20. cify: Persoal Property Taxes   | 16.      | \$             | 22.82                   |
|         | allment or lease payments:   |          | -              |                         |
|         | Car payments for Vehicle 1   | 17a.     | \$             | 0.00                    |
|         | Car payments for Vehicle 2   | 17b.     | \$             | 0.00                    |
|         | Other. Specify:  | 17c.     | \$             | 0.00                    |
|         | Other. Specify:  | 17d.     | \$             | 0.00                    |
|         | r payments of alimony, maintenance, and support that you did not report as   | <u> </u> | · <del></del>  |                         |
|         | ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).   |          | \$             | 0.00                    |
| Oth     | er payments you make to support others who do not live with you.   |          | \$             | 0.00                    |
| Spe     | ·  | 19.      |                |                         |
|         | er real property expenses not included in lines 4 or 5 of this form or on Scho   |          |                |                         |
|         | Mortgages on other property  | 20a.     |                | 0.00                    |
|         | Real estate taxes  | 20b.     | ·              | 0.00                    |
|         | Property, homeowner's, or renter's insurance   | 20c.     | ·              | 0.00                    |
|         | Maintenance, repair, and upkeep expenses   | 20d.     | ·              | 0.00                    |
|         | Homeowner's association or condominium dues  | 20e.     | ·              | 0.00                    |
| Oth     | er: Specify:   | 21.      | +\$            | 0.00                    |
| Calc    | ulate your monthly expenses  |          |                |                         |
|         | Add lines 4 through 21.  |          | \$             | 1,556.62                |
|         | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2  |          | \$             | 1,000.02                |
|         | Add line 22a and 22b. The result is your monthly expenses.   |          | ·              | 4 550 00                |
| 220.    | Add line 22a and 22b. The result is your monthly expenses.   |          | \$             | 1,556.62                |
| Calc    | sulate your monthly net income.  |          |                |                         |
| 23a.    | Copy line 12 (your combined monthly income) from Schedule I.   | 23a.     | \$             | 2,039.23                |
|         | Copy your monthly expenses from line 22c above.  | 23b.     | -\$            | 1,556.62                |
|         | •  |          |                |                         |
| 23c.    | Subtract your monthly expenses from your monthly income.   |          |                | 400.04                  |
|         | The result is your monthly net income.   | 23c.     | \$             | 482.61                  |
| For e   | rou expect an increase or decrease in your expenses within the year after you ample, do you expect to finish paying for your car loan within the year or do you expect you fication to the terms of your mortgage? |          |                | e or decrease because o |
|         |  |          |                |                         |
| -       | E5.   EADIGIT HOLD.  |          |                |                         |

| Fill in th  | is information to identify you                             | r case:                        |                              |                                |                             |
|-------------|--|--------------------------------|------------------------------|--------------------------------|-----------------------------|
| Debtor 1    | Shelly Ann O'Br  | ien                            |                              |                                |                             |
|             | First Name   | Middle Name                    | Last Name                    |                                |                             |
| Debtor 2    |  |                                |                              |                                |                             |
| (Spouse if, | filing) First Name   | Middle Name                    | Last Name                    |                                |                             |
| United S    | States Bankruptcy Court for the:                           | WESTERN DISTRICT               | OF MISSOURI                  |                                |                             |
| Case nui    | mher   |                                |                              |                                |                             |
| (if known)  |  |                                |                              | Г                              | Check if this is an         |
|             |  |                                |                              |                                | amended filing              |
|             |  |                                |                              |                                |                             |
|             |  |                                |                              |                                |                             |
| Officia     | l Form 106Dec  |                                |                              |                                |                             |
| Decl        | aration About  | an Individua                   | Debtor's Sc                  | hedules                        | 12/15                       |
|             | aration / toods  | all illaiviada                 |                              |                                | 1210                        |
| If two ma   | arried people are filing togethe                           | er, both are equally respo     | onsible for supplying corr   | ect information.               |                             |
|             |  |                                |                              |                                |                             |
|             | t file this form whenever you                              |                                |                              |                                |                             |
|             | g money or property by fraud both. 18 U.S.C. §§ 152, 1341, |                                | kruptcy case can result in   | i fines up to \$250,000, or im | prisonment for up to 20     |
| years, or   | botti. 16 0.3.C. 99 132, 1341,                             | 1313, and 3371.                |                              |                                |                             |
|             |  |                                |                              |                                |                             |
|             | Sign Below   |                                |                              |                                |                             |
|             |  |                                |                              |                                |                             |
| Did         | I you pay or agree to pay som                              | eone who is NOT an atto        | rney to help you fill out ba | ankruptcy forms?               |                             |
|             |  |                                |                              |                                |                             |
|             | No   |                                |                              |                                |                             |
|             | Yes. Name of person  |                                |                              | Attach Bankruptcy              | Petition Preparer's Notice, |
| _           | ·  |                                |                              | Declaration, and Signation     | gnature (Official Form 119) |
|             |  |                                |                              |                                |                             |
| Und         | ler penalty of perjury, I declare                          | o that I have road the sun     | amary and schodules files    | I with this doclaration and    |                             |
|             | they are true and correct.                                 | s tilat i liave read tile Sull | illiary and schedules med    | i with this decidiation and    |                             |
|             |  |                                |                              |                                |                             |
|             | /s/ Shelly Ann O'Brien                                     |                                | X X                          | Dahtan O                       |                             |
|             | Shelly Ann O'Brien<br>Signature of Debtor 1                |                                | Signature of I               | Deptor 2                       |                             |
|             | organization Debitor 1                                     |                                |                              |                                |                             |
|             | Date May 23, 2018  |                                | Date                         |                                |                             |
|             |  |                                |                              |                                |                             |

| Fills           | n this inform                                     | nation to identify you                     | r case:                                    |   |  |   |
|-----------------|---|--|--|---|--|---|
| Deb             |   | Shelly Ann O'Br                            |  |   |  |   |
| Deb             | 101 1   | First Name                                 | Middle Name                                | Last Name   |  |   |
| Deb             | tor 2<br>ise if, filing)                          | First Name                                 | Middle Name                                | Last Name   |  |   |
|                 |   | nkruptcy Court for the:                    | WESTERN DISTRICT O                         |   |  |   |
| Office          | eu States Dai                                     | ikruptcy Court for the.                    | - WESTERN DISTRICT OF                      | WIGGOOK   |  |   |
| Case<br>(if kno | e number<br><sub></sub>                           |  |  |   |  | theck if this is an mended filing                     |
| Sta<br>Be as    | s complete a                                      | of Financial                               | ble. If two married people a               |   | equally responsible for sup                                    |   |
|                 |   | i). Answer every ques                      |  | this form. On the top of any  | / additional pages, write you                                  | ir name and case                                      |
| Part            | 1: Give D   | etails About Your Ma                       | rital Status and Where You                 | Lived Before  |  |   |
| 1.              | What is your                                      | current marital statu                      | s?   |   |  |   |
|                 | <ul><li>□ Married</li><li>■ Not married</li></ul> | ried                                       |  |   |  |   |
| 2.              | During the la                                     | ıst 3 years, have you                      | lived anywhere other than                  | where you live now?   |  |   |
|                 | ■ No<br>□ Yes. List                               | t all of the places you I                  | ived in the last 3 years. Do n             | ot include where you live now   | <i>'</i> .   |   |
|                 | Debtor 1 Pri                                      | or Address:                                | Dates Debtor 1 lived there                 | Debtor 2 Prior Ad   | dress:   | Dates Debtor 2 lived there                            |
|                 |   |  |  |   | ity property state or territory<br>co, Texas, Washington and W |   |
|                 | ■ No<br>□ Yes. Ma                                 | ke sure you fill out <i>Scl</i>            | nedule H: Your Codebtors (O                | fficial Form 106H).   |  |   |
| Part            | 2 Explain   | n the Sources of You                       | r Income                                   |   |  |   |
|                 | Fill in the tota                                  | I amount of income yo                      | u received from all jobs and               | ng a business during this yeall businesses, including parter together, list it only once ur |  | ndar years?   |
|                 | □ No<br>■ Yes. Fill                               | in the details.                            |  |   |  |   |
|                 |   |  | Debtor 1                                   |   | Debtor 2   |   |
|                 |   |  | Sources of income<br>Check all that apply. | Gross income<br>(before deductions and<br>exclusions)                                       | Sources of income<br>Check all that apply.                     | Gross income<br>(before deductions<br>and exclusions) |
|                 |   | of current year until<br>d for bankruptcy: | ■ Wages, commissions, bonuses, tips        | \$11,268.93   | ☐ Wages, commissions, bonuses, tips                            |   |
|                 |   |  | ☐ Operating a business                     |   | ☐ Operating a business   |   |

Official Form 107

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Debtor 1 Shelly Ann O'Brien Case number (if known)

| Debtor                                 | 1 <b>Sh</b>   | elly Ann                      | O'Brien  |  | Cas   | Case number (if known)                      |                           |   |  |  |  |
|--|---|-------------------------------|--|--|---|---|---------------------------|---|--|--|--|
|  |   |                               |  |  |   |   |                           |   |  |  |  |
|  | Debtor  |                               |  | Debtor 1   |   | Debtor 2                                    |                           |   |  |  |  |
|  |   |                               |  | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions)                     | Sources of inco                             |                           | Gross income<br>(before deductions<br>and exclusions) |  |  |  |
|  |   |                               | 31, 2017 )                                       | ■ Wages, commissions, bonuses, tips  | \$28,391.00   | ☐ Wages, components, tips                   | nissions,                 |   |  |  |  |
|  |   |                               |  | ☐ Operating a business   |   | ☐ Operating a b                             | ousiness                  |   |  |  |  |
|  |   | dar year be<br>December       |  | ■ Wages, commissions, bonuses, tips  | \$37,379.00   | ☐ Wages, comi                               | nissions,                 |   |  |  |  |
|  |   |                               |  | ☐ Operating a business   |   | ☐ Operating a b                             | ousiness                  |   |  |  |  |
| and<br>win                             | d other<br>inings.<br>t each s  | public bene<br>If you are fil | fit payments;<br>ing a joint ca<br>the gross inc | her that income is taxable. Expensions; rental income; inte se and you have income that yome from each source separa | rest; dividends; money collect<br>you received together, list it of       | cted from lawsuits; i<br>only once under De | royalties; and<br>btor 1. |   |  |  |  |
|  |   |                               |  | Debtor 1   |   | Debtor 2                                    |                           |   |  |  |  |
|  |   |                               |  | Sources of income<br>Describe below.   | Gross income from<br>each source<br>(before deductions and<br>exclusions) | Sources of inco                             | ome                       | Gross income<br>(before deductions<br>and exclusions) |  |  |  |
| (January 1 to December 31, 2017) Compe |   |                               | 31, 2017 )                                       | Worker's<br>Compensation<br>Settlement   | \$10,260.97   |   |                           |   |  |  |  |
| Dort 2:                                | Lie   | · Cortain D                   | vymanta Va                                       | · Made Defere Very Filed for   | Donkruntov  |   |                           |   |  |  |  |
| Part 3:                                | LIST  | Certain Pa                    | iyments fot                                      | Made Before You Filed for  | Бапктирісу  |   |                           |   |  |  |  |
| 6. Are                                 | Are either Debtor 1's or Debtor 2's debts primarily consumer debts?  □ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred lindividual primarily for a personal, family, or household purpose." |                               |  |  |   |   |                           |   |  |  |  |
|  |   | During the                    | 90 days bef                                      | ore you filed for bankruptcy, d  | id you pay any creditor a tota  | al of \$6,425* or mor                       | e?                        |   |  |  |  |
|  |   | □ <sub>No.</sub>              | Go to line                                       |  |   |   |                           |   |  |  |  |
|  |   | Yes                           | paid that control not include                    | each creditor to whom you pa<br>reditor. Do not include payment<br>payments to an attorney for t                     | nts for domestic support obliq<br>his bankruptcy case.                    | gations, such as chi                        | ild support a             | nd alimony. Also, do                                  |  |  |  |
| _                                      | * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.   |                               |  |  |   |   |                           |   |  |  |  |
| -                                      | Yes.  | <b>Debtor 1</b> During the    |  |  |   |   |                           |   |  |  |  |
|  |   | □ No.                         | Go to line                                       | 7.   |   |   |                           |   |  |  |  |
|  | Yes List below each creditor to whom you paid a total of \$600 or more and the total a include payments for domestic support obligations, such as child support and ali attorney for this bankruptcy case.  |                               |  |  |   |   |                           |   |  |  |  |
| Cı                                     | editor'   | s Name an                     | d Address  | Dates of payme   | ent Total amount  | Amount you                                  | Was this p                | payment for   |  |  |  |

Document Page 36 of 48 Debtor 1 Shelly Ann O'Brien

Case number (if known)

|     | Creditor's Name and Address   | Dates of payment                             | Total amount paid | Amount you still owe | Was this pay  | yment for    |  |  |  |  |  |  |  |
|-----|---|--|-------------------|----------------------|---|--------------|--|--|--|--|--|--|--|
|     | Ally Financial<br>200 Renaissance CTR<br>Detroit, MI 48243  | 3/2018 & 4/2018                              | \$798.00          | \$22,400.00          | ☐ Mortgage ■ Car ☐ Credit Ca ☐ Loan Rep ☐ Suppliers ☐ Other | rd<br>ayment |  |  |  |  |  |  |  |
| 7.  | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one fo a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. |  |                   |                      |   |              |  |  |  |  |  |  |  |
|     | □ No  |  |                   |                      |   |              |  |  |  |  |  |  |  |
|     | Yes. List all payments to an insider.   |  |                   |                      |   |              |  |  |  |  |  |  |  |
|     | Insider's Name and Address  | Dates of payment                             | Total amount paid | Amount you still owe | Reason for t  | this payment |  |  |  |  |  |  |  |
|     | Linda O'Brien<br>4205 Jenny Lind<br>Fort Smith, AR 72901  |  | \$400.00          | \$696.00             |   |              |  |  |  |  |  |  |  |
|     | Include payments on debts guaranteed or cos  ■ No □ Yes. List all payments to an insider  Insider's Name and Address  | igned by an insider.  Dates of payment       | Total amount      | Amount you still owe | Reason for t  | this payment |  |  |  |  |  |  |  |
| Par | t 4: Identify Legal Actions, Repossession   | s and Foreclosures                           | paid              | Still Owe            | include credi   | tor s riame  |  |  |  |  |  |  |  |
| rai | identify Legal Actions, Repossession  | is, and Foreclosures                         |                   |                      |   |              |  |  |  |  |  |  |  |
| 9.  | Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.  No   |  |                   |                      |   |              |  |  |  |  |  |  |  |
|     | Yes. Fill in the details.   | Natura of the case                           |                   |                      | Chatria of the core   |              |  |  |  |  |  |  |  |
|     | Case title Case number  | Nature of the case                           | Court or agency   |                      | Status of the case  |              |  |  |  |  |  |  |  |
| 10. | Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.  No. Go to line 11.  |  |                   |                      |   |              |  |  |  |  |  |  |  |
|     | Yes. Fill in the information below.   |  |                   |                      |   |              |  |  |  |  |  |  |  |
|     | Creditor Name and Address   | Describe the Property  Explain what happened |                   |                      | Date Value of the property                                  |              |  |  |  |  |  |  |  |
| 11. | Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?  No Yes. Fill in the details.  |  |                   |                      |   |              |  |  |  |  |  |  |  |
|     | Creditor Name and Address   | Describe the action the creditor took        |                   |                      | action was  | Amount       |  |  |  |  |  |  |  |
|     |   |  |                   |                      |   |              |  |  |  |  |  |  |  |

Case 18-60624-can13 Doc 1 Filed 05/30/18 Entered 05/30/18 14:34:09 Page 37 of 48 Document Debtor 1 Shelly Ann O'Brien Case number (if known) 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of **Address** transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You **Barrett Law Attorney Fees** 4/2018 \$750.00 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο П Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of

**Address** 

transferred

payment

or transfer was

made

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Case number (if known)

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. **Person Who Received Transfer** Description and value of Describe any property or Date transfer was Address property transferred payments received or debts made paid in exchange Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Last balance Type of account or Date account was account number instrument closed, sold, before closing or Address (Number, Street, City, State and ZIP Code) moved, or transfer transferred **Great Souther Bank** XXXX-3703 9/2017 \$10.00 Checking 1701 W. Jackson St. □ Savings Ozark, MO 65721 ☐ Money Market □ Brokerage □ Other 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, have it? State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code)

Debtor 1 Shelly Ann O'Brien

Debtor 1 Shelly Ann O'Brien

Case number (if known)

| Par | rt 9: Identify Pro   | pperty You Hold or Control for   | Someone Else   |                                   |                                   |                       |
|-----|--|--|--|-----------------------------------|-----------------------------------|-----------------------|
| 23. | 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. |  |  |                                   |                                   |                       |
|     | ■ No   |  |  |                                   |                                   |                       |
|     | ☐ Yes. Fill in t   | he details.  |  |                                   |                                   |                       |
|     | Owner's Name<br>Address (Number,   | Street, City, State and ZIP Code)  | Where is the property?<br>(Number, Street, City, State and ZIP<br>Code)  | Des                               | scribe the property               | Value                 |
| Par | rt 10: Give Detail   | s About Environmental Inform   | nation   |                                   |                                   |                       |
| For | the purpose of Pa  | rt 10, the following definitions   | s apply:   |                                   |                                   |                       |
|     | toxic substances   | s, wastes, or material into the a  | r local statute or regulation concer<br>air, land, soil, surface water, groun<br>lbstances, wastes, or material. |                                   |                                   |                       |
|     | •  | ocation, facility, or property as<br>or utilize it, including disposa    | s defined under any environmental<br>I sites.  | law,                              | whether you now own, operate,     | or utilize it or used |
|     |  | <i>rial</i> means anything an enviror<br>ial, pollutant, contaminant, or | nmental law defines as a hazardou<br>similar term.   | s was                             | te, hazardous substance, toxic    | substance,            |
| Rep | ort all notices, rel   | eases, and proceedings that y  | ou know about, regardless of whe   | n the                             | y occurred.                       |                       |
| 24. | Has any governn  | nental unit notified you that yo   | ou may be liable or potentially liable   | e und                             | er or in violation of an environm | ental law?            |
|     | ■ No<br>□ Yes. Fill in the   | he details.  |  |                                   |                                   |                       |
|     | Name of site  Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  ZIP Code)                        |  | nd   | Environmental law, if you know it | Date of notice                    |                       |
| 25. | Have you notified  | d any governmental unit of any   | y release of hazardous material?   |                                   |                                   |                       |
|     | ■ No □ Yes. Fill in the  | he details.  |  |                                   |                                   |                       |
|     | Name of site<br>Address (Number,   | Street, City, State and ZIP Code)  | Governmental unit<br>Address (Number, Street, City, State ar<br>ZIP Code)  | nd                                | Environmental law, if you know it | Date of notice        |
| 26. | Have you been a  | party in any judicial or admini  | istrative proceeding under any env   | /ironn                            | nental law? Include settlements   | and orders.           |
|     | ■ No □ Yes. Fill in the  | he details   |  |                                   |                                   |                       |
|     | Case Title<br>Case Number  |  | Court or agency Name Address (Number, Street, City, State and ZIP Code)  | Nat                               | ure of the case                   | Status of the case    |
| Par | rt 11: Give Detail   | s About Your Business or Coi   | nnections to Any Business  |                                   |                                   |                       |
| 27. | Within 4 years be  | efore you filed for bankruptcy,  | did you own a business or have a   | ny of                             | the following connections to an   | y business?           |
|     | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  |  |  |                                   |                                   |                       |
|     | ■ A member of a limited liability company (LLC) or limited liability partnership (LLP)   |  |  |                                   |                                   |                       |
|     | ☐ A partner  | in a partnership   |  |                                   |                                   |                       |
|     | ☐ An office  | r, director, or managing execu   | tive of a corporation  |                                   |                                   |                       |
|     | ☐ An owner of at least 5% of the voting or equity securities of a corporation  |  |  |                                   |                                   |                       |

Case 18-60624-can13 Doc 1 Filed 05/30/18 Entered 05/30/18 14:34:09 Page 40 of 48 Document Debtor 1 Shelly Ann O'Brien Case number (if known) No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name** Do not include Social Security number or ITIN. **Address** (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed **Journey Marketing LLC** travel card sales EIN: 81-2846733 1001 N. 24th St. From-To 6/2016 - 8/2017 **Kellie Hodges** Ozark, MO 65721 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Shelly Ann O'Brien Shelly Ann O'Brien Signature of Debtor 2 Signature of Debtor 1 Date May 23, 2018 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

☐ Yes

| Fill in this information to identify your case:                      |                    |  |  |  |  |
|--|--------------------|--|--|--|--|
| Debtor 1   | Shelly Ann O'Brien |  |  |  |  |
| Debtor 2<br>(Spouse, if filing)                                      |                    |  |  |  |  |
| United States Bankruptcy Court for the: Western District of Missouri |                    |  |  |  |  |
| Case number (if known)   |                    |  |  |  |  |

| Check | Check as directed in lines 17 and 21:                                |  |  |  |  |
|-------|--|--|--|--|--|
|       | According to the calculations required by this Statement:            |  |  |  |  |
|       | 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3). |  |  |  |  |
|       | Disposable income is determined under 11 U.S.C. § 1325(b)(3).        |  |  |  |  |
|       | 3. The commitment period is 3 years.                                 |  |  |  |  |
|       | 4. The commitment period is 5 years.                                 |  |  |  |  |

☐ Check if this is an amended filing

## Official Form 122C-1

# Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

| Pa | art       | 1: Calculate Your Average Monthly Income  |                    |                               |   |                        |                   |  |                                 |
|----|-----------|---|--------------------|-------------------------------|---|------------------------|-------------------|--|---------------------------------|
| 1  |           | What is your marital and filing status? Check one of  | only.              |                               |   |                        |                   |  |                                 |
|    |           | ■ Not married. Fill out Column A, lines 2-11.   |                    |                               |   |                        |                   |  |                                 |
|    |           | ☐ Married. Fill out both Columns A and B, lines 2-11  |                    |                               |   |                        |                   |  |                                 |
|    | 10<br>the | I in the average monthly income that you received from al 1(10A). For example, if you are filing on September 15, the 6-6 months, add the income for all 6 months and divide the tobuses own the same rental property, put the income from that | month peal by 6. F | eriod would<br>fill in the re | l be March 1 thro<br>sult. Do not inclu | ugh Augu<br>de any ind | st 31. If the amo | ount of your monthly incon<br>ore than once. For examp | ne varied during<br>le, if both |
|    |           |   |                    |                               |   | Columi<br>Debtor       |                   | Column B Debtor 2 or non-filing spouse                 |                                 |
| 2  |           | Your gross wages, salary, tips, bonuses, overtime payroll deductions).  | , and c            | ommissio                      | ons (before all                         | \$                     | 2,911.72          | \$   |                                 |
| 3  |           | <b>Alimony and maintenance payments.</b> Do not includ Column B is filled in.   | e paym             | ents from                     | a spouse if                             | \$                     | 0.00              | \$   |                                 |
| 4  |           | All amounts from any source which are regularly pof you or your dependents, including child supported from an unmarried partner, members of your househo and roommates. Do not include payments from a spouyou listed on line 3.                | rt. Includ         | de regulai<br>depende         | r contributions<br>nts, parents,        | \$                     | 0.00              | \$   |                                 |
| 5  |           | Net income from operating a business, profession, or farm   | Debto              | r 1                           |   |                        |                   |  |                                 |
|    |           | Gross receipts (before all deductions)  | \$_                | 0.00                          |   |                        |                   |  |                                 |
|    |           | Ordinary and necessary operating expenses   | <b>-</b> \$ _      | 0.00                          |   |                        |                   |  |                                 |
|    |           | Net monthly income from a business, profession, or fa   | arm\$_             | 0.00                          | Copy here ->                            | •\$                    | 0.00              | \$   |                                 |
| 6  | <b>.</b>  | Net income from rental and other real property  | Debto              |                               |   |                        |                   |  |                                 |
|    |           | Gross receipts (before all deductions)  | \$_                | 0.00                          |   |                        |                   |  |                                 |
|    |           | Ordinary and necessary operating expenses   | <b>-</b> \$ _      | 0.00                          |   |                        |                   |  |                                 |
|    |           | Net monthly income from rental or other real property   | Φ.                 | 0.00                          | Copy here ->                            | · \$                   | 0.00              | \$   |                                 |

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Case number (if known)

Shelly Ann O'Brien Column A Column B Debtor 1 Debtor 2 or non-filing spouse 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you\_\_\_\_\_ For your spouse\_\_\_\_\_ 9. Pension or retirement income. Do not include any amount received that was a 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 11. Calculate your total average monthly income. Add lines 2 through 10 for 2.911.72 2,911.72 \$ each column. Then add the total for Column A to the total for Column B. Total average monthly income **Determine How to Measure Your Deductions from Income** Part 2: 12. Copy your total average monthly income from line 11. 2,911.72 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. ☐ You are married and your spouse is filing with you. Fill in 0 below. ☐ You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. Total 0.00 0.00 Copy here=> 2,911.72 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 2,911.72 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year). x 12 34,940.64 15b. The result is your current monthly income for the year for this part of the form.

Debtor 1

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| Debt | tor 1  | She          | Ily Ann O'Brien  |                 |               | Case number (if known)                     |             |                  |
|------|--|--------------|--|-----------------|---------------|--|-------------|------------------|
| 16   | S. Calo  | culat        | e the median family income that applies to   | <b>you.</b> Fol | llow these s  | teps:                                      |             |                  |
|      | 16a  | . Fill i     | n the state in which you live.   |                 | MO            | _  |             |                  |
|      | 16b  | Filli        | n the number of people in your household.  |                 | 1             |  |             |                  |
|      |  |              | the median family income for your state and  | d size of h     |               | _  | ¢           | 46,488.00        |
|      |  | To finst     | nd a list of applicable median income amoun uctions for this form. This list may also be available.                                    | nts, go on      | line using th | ne link specified in the separate          | Ψ.          | ·                |
| 17   | . Hov  | v do<br>_    | he lines compare?  |                 |               |  |             |                  |
|      | 17a  |              | Line 15b is less than or equal to line 16c. 11 U.S.C. § 1325(b)(3). Go to Part 3. Do   |                 |               |  |             |                  |
|      | 17b  | . [          | Line 15b is more than line 16c. On the top<br>1325(b)(3). Go to Part 3 and fill out Calc<br>your current monthly income from line 14   | culation        |               |  |             |                  |
| Par  | t 3:   | C            | lculate Your Commitment Period Under 1   | 1 U.S.C.        | § 1325(b)(4   | )  |             |                  |
| 18.  | Cop  | у уо         | ur total average monthly income from line  | 11.             |               |  | \$          | 2,911.72         |
| 19.  | conf   | end          | ne marital adjustment if it applies. If you ar<br>hat calculating the commitment period under<br>income, copy the amount from line 13. | re married      | d, your spou  | use is not filing with you, and you        |             |                  |
|      |  |              | e marital adjustment does not apply, fill in 0 o   | on line 19a     | а.            |  | -\$         | 0.00             |
|      |  |              |  |                 |               |  |             |                  |
|      | 19b  | Sub          | tract line 19a from line 18.   |                 |               |  | \$_         | 2,911.72         |
| 20.  | Cal  | culat        | your current monthly income for the yea  | ır. Follow      | these step    | s:   |             |                  |
|      | 20a  | . Cop        | y line 19b   |                 |               |  | \$          | 2,911.72         |
|      |  |              | iply by 12 (the number of months in a year).   |                 |               |  |             | <b>x</b> 12      |
|      |  |              |  |                 |               |  |             |                  |
|      | 20b  | . The        | result is your current monthly income for the  | year for t      | his part of t | he form                                    | \$          | 34,940.64        |
|      |  |              |  |                 |               |  |             |                  |
|      |  |              |  |                 |               |  |             |                  |
|      | 20c.   | Cop          | y the median family income for your state and  | d size of I     | household f   | rom line 16c                               | \$          | 46,488.00        |
|      | 21   | Ηον          | do the lines compare?  |                 |               |  |             |                  |
|      |  | _            | •  |                 |               |  |             | <del>-</del>     |
|      |  | •            | Line 20b is less than line 20c. Unless otherw period is 3 years. Go to Part 4.   |                 | ·             |  |             |                  |
|      |  |              | Line 20b is more than or equal to line 20c. U commitment period is 5 years. Go to Part 4.  |                 | nerwise orde  | ered by the court, on the top of page 1 of | this form,  | check box 4, The |
| Par  | t 4:   |              | gn Below   |                 |               |  |             |                  |
|      | By s   | ignir        | g here, under penalty of perjury I declare that  | t the infor     | mation on t   | his statement and in any attachments is    | true and co | orrect.          |
| )    |  |              | lly Ann O'Brien  |                 | _             |  |             |                  |
|      |  |              | Ann O'Brien<br>re of Debtor 1  |                 |               |  |             |                  |
|      |  | • <b>M</b> a | y 23, 2018<br>1/DD / YYYY  |                 |               |  |             |                  |
|      | If you checked 17a, do NOT fill out or file Form 122C-2. |              |  |                 |               |  |             |                  |

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

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Debtor 1 Shelly Ann O'Brien Case number (if known)

### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 11/01/2017 to 04/30/2018.

### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Enterprise

Income by Month:

| 6 Months Ago: | 11/2017            | \$2,550.11 |
|---------------|--------------------|------------|
| 5 Months Ago: | 12/2017            | \$4,097.45 |
| 4 Months Ago: | 01/2018            | \$2,903.25 |
| 3 Months Ago: | 02/2018            | \$2,809.61 |
| 2 Months Ago: | 03/2018            | \$2,609.01 |
| Last Month:   | 04/2018            | \$2,500.89 |
|               | Average per month: | \$2,911.72 |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: |        | Liquidation        |
|------------|--------|--------------------|
|            | \$245  | filing fee         |
|            | \$75   | administrative fee |
|            | + \$15 | trustee surcharge  |
|            | \$335  | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
| - | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.